

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**DOCUMENT # A97000001047**

1. Entity Name  
**ROADWAY REALTY LIMITED PARTNERSHIP**



FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 MAR 10 AM 8:54

Principal Place of Business  
**7777 GLADES ROAD, SUITE 300**  
**BOCA RATON, FL 33434**

Mailing Address  
**7777 GLADES ROAD, SUITE 300**  
**BOCA RATON, FL 33434**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01302006

Chg-LP

CR2E003 (11/05)

4. FEI Number

**06-1486308**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CROSSROADS SALES CORP.**  
**% JAMES J. WHEELER**  
**7777 GLADES ROAD, SUITE 300**  
**BOCA RATON, FL 33434**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P97000041743**  
 NAME **CROSSROADS SALES CORP.**  
 STREET ADDRESS **7777 GLADES ROAD, SUITE 300**  
 CITY-ST-ZIP **BOCA RATON, FL 33434**

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 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

**900068559039**  
**03/24/06--01005--012 \*\*508.75**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: **Robert L. Martin** **3/3/06** **401-766-7545**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER