2006 LIMITED PARTNERSHIP ANNUAL REPORT

Apr 27, 2006 08:00 AM Secretary of State Due By May 1, 2006 DOCUMENT # A98000000528 CRANE CREEK SENIOR HOUSING PARTNERS, LTD. Principal Place of Business Malling Address 2309 S. BABCOCK STREET 2001 W. BLUE HERON U00000540124 MELBOURNE, FL 32901 RIVERIA BCH, FL 33404 05/10/06-80005-002 508.75 04212006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3494209 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HAMLIN, CURTIS D DO NOT WRITE 1205 MANATEE AVENUE WEST BRADENTON, FL 34205-7595 IN THIS SPACE 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 lamillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little 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 filled to change a general partner. 12. GENERAL PARTNER INFORMATION DOCUMENT # N96000003114 NAME THE PARTNERSHIP, INC. STREET AUGRESS 2001 W. BLUE HERON BLVD. CITY-ST-ZIP RIVIERA BEACH, FL 33404 DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT & NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-709 DOCUMENT

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. 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:

STREET ADDRESS CITY-ST-27P DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

MIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

841-3500X106

FILED