


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 22, 2006 08:00 AM
Secretary of State

DOCUMENT # A98000001170 1. Entity Name NH6 LR XI, LTD.	
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Principal Place of Business 2295 CORPORATE BLVD., N.W., SUITE 222 P.O. BOX 5010 BOCA RATON, FL 33431	Mailing Address 2295 CORPORATED BLVD. NW SUITE 222 BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE

01182006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0833823	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERRICK, NORTON
2295 CORPORATE BLVD., N.W., SUITE 222
BOCA RATON, FL 33431

**DO NOT WRITE
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 familiar with, and accept the obligations of registered agent.

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

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

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04/06/06-80021-001 7122.50

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 #	P98000042300
NAME	G-P NH6 LR XI, INC.
STREET ADDRESS	2295 CORPORATE BLVD., N.W., SUITE 222
CITY-ST-ZIP	BOCA RATON, FL 33431
DOCUMENT #	
NAME	
STREET ADDRESS	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

AKulli-Controllor / GP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #