2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 07, 2006 08:00 AM Secretary of State

1. Entity Name CYPRESS CREEK EXECUTIVE COURT, LTD.



Principal Place of Business

7700 CONGRESS AVE., #3100 BOCA RATON, FL 33487 Mailing Address

7700 CONGRESS AVE., #3100 BOCA RATON, FL 33487



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0499913 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

FELUREN, MARK 2200 NORTH COMMERCE PARKWAY, SUITE #202 WESTON, FL 33326

DO NOT WRITE IN THIS SPACE

WESTON, FL 33326		IN THIS SPACE
	named entity submits this statement for the purpose of changing its re- tions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
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 \$900.0	0
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 #	F01000001599	
NAME	A & D HOLDINGS, INC.	
STREET ADDRESS	7700 CONGRESS AVE., #3100	U00000496740
CITY-ST-ZIP	BOCA RATON, FL 33487	04/22/06-80023-015 500.00
DOCUMENT#		# 11
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		
NAME		DO NOT MORE
STREET AODRESS		DO NOT WRITE
CITY-ST-ZIP		IN THE COACE
DOCUMENT #		IN THIS SPACE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. Thereby certify that the information supplied with this tilies does not qualify for the exemptions contained in Chapter 119, Florida Statutés. 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 it made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute the proof as required by Chapter 620, Florida Statutes

SIGNATURE:

CHECK HERE

STAPLE

DOCUMENT F NAME STREET ADDRESS CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CHY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-5-06

561-997-5777

Dayime Phone #