

# 2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B02000000342

Entity Name: CNL RETIREMENT ER1, LP

**FILED**  
**Feb 15, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

450 S. ORANGE AVE.  
ORLANDO, FL 32801

**New Principal Place of Business:**

420 S. ORANGE AVE.  
SUITE 500  
ORLANDO, FL 32801 US

**Current Mailing Address:**

450 S. ORANGE AVENUE  
SUITE 200, ATTN: AMY PATTERSON  
ORLANDO, FL 328013336

**New Mailing Address:**

420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801 US

FEI Number: 51-0435718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PATTERSON, AMY J  
450 S. ORANGE AVE.  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

PATTERSON, AMY J  
420 S. ORANGE AVE.  
SUITE 500  
ORLANDO, FL 32801 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

02/15/2006

Date

**GENERAL PARTNER INFORMATION:**

Document #: M02000002782  
Name: CNL RETIREMENT ER1 GP, LLC  
Address: 450 S. ORANGE AVE.  
City-St-Zip: ORLANDO, FL 32801

**ADDRESS CHANGES ONLY:**

Address: 420 S. ORANGE AVE., SUITE 500  
City-St-Zip: ORLANDO, FL 32801 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STUART J. BEEBE

Electronic Signature of Signing General Partner

P

02/15/2006

Date