2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# B05000000260

Entity Name: CHATTANOOGA SURGERY CENTER OWNERS LIMITED PARTNERSHIP

Current Principal Place of Business:

450 S. ORANG AVE., SUITE 200
ORLANDO, FL 328013336

New Principal Place of Business:

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

Current Mailing Address:

450 S. ORANG AVE., SUITE 200
ORLANDO, FL 328013336

New Mailing Address:

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

FEI Number: 22-3903612 **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., SUITE 200
ORLANDO, FL 328013336 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: _____ 02/15/2006
Electronic Signature of Registered Agent — Date

GENERAL PARTNER INFORMATION:

Document #: M05000003133
Name: CNL RETIREMENT DAS CHATTANOOGA TN GP, LLC
Address: 450 S. ORANGE AVE., SUITE 200
City-St-Zip: ORLANDO, FL 328013336

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 P 02/15/2006
Electronic Signature of Signing General Partner — Date