

**2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008**

**FILED
Apr 03, 2008 08:00 AM
Secretary of State**

DOCUMENT # B99000000272

1. Entity Name
INDIANTOWN PROJECT INVESTMENT PARTNERSHIP,
L.P.



Principal Place of Business 9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110	Mailing Address 9405 ARROWPOINT BLVD CHARLOTTE, NC 28273-8110
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DO NOT WRITE IN THIS SPACE



03132008 No Chg-LP CR2E003 (12/06)

4. FEI Number 52-2129357	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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, 2008, 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 filed to change a general partner.**

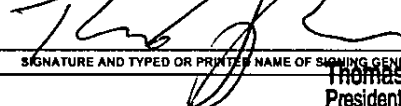
12. GENERAL PARTNER INFORMATION	
DOCUMENT #	M05000006021
NAME	TOYAN ENTERPRISES, LLC
STREET ADDRESS	9405 ARROWPOINT BLVD
CITY-ST-ZIP	CHARLOTTE, NC 282738110
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/15/08-80008-005 500.00

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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:  *JP* April 2, 2008 704-525-3800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #
**Thomas J. Bonner
President**