## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L03000042463

1. Entity Name

ALLIANT TAX CREDIT FUND XI LIGHTHOUSE POINT,



FILED Mar 28, 2005 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

Mailing Address

340 ROYAL POINCIANA WAY, STE. 305 PALM BEACH, FL 33480

340 ROYAL POINCIANA WAY, STE. 305 PALM BEACH, FL 33480



03012005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0347051

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMLIN, CURTIS D ESQ PORGES, HAMLIN, KNOWLES & PROUTY, P.A. 1205 MANATEE AVE. W. BRADENTON, FL 34205

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

	named entity submits this statement for the purpose of changions of registered agent.	ing its registered office or registered agent, or bot	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE				
010101101101	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE	
Fi Di	ling Fee is \$50.00 ue by May 1, 2005		U00000279361 02/28/05-80064-002 50.00	
9.	MANAGING MEMBERS/MANAGERS		the mas company of the was the	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HORWITZ, SHAWN 21550 OXNARD STREET, SUITE 1020 WOODLAND HILLS, CA 91367			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			*	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby of indicated limited lia	pertify that the information supplied with this filing does not qua on this report is true and accorded and that my signature shall billity company or the receiver of trustee empowered to execut	alify for fre exemption stated in Section 119.07(3)( Thave the same legal effect as if made under oath te this report as required by Chapter 608, Florida S	Florida Statutes. I further certify that the information; that I am a managing member or manager of the Statutes.	