2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002492

Entity Name: CNL RETIREMENT PC1 GP VENICE FL, LLC

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE ORLANDO, FL 328013336

SUITE 500

ORLANDO, FL 328013336

Current Mailing Address: New Mailing Address:

450 S. ORANGE AVENUE 420 S. ORANGE AVENUE SUITE 200, ATTN: AMY PATTERSON SUITE 500

ORLANDO, FL 32801 ORLANDO, FL 32801

FEI Number: 02-0646038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PATTERSON, AMY J PATTERSON, AMY J 450 S. ORANGE AVENUE 420 S. ORANGE AVENUE SUITE 500 SUITE 200 ORLANDO, FL 328013336 US ORLANDO, FL 328013336 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: 04/25/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change () Addition

HUTCHISON, THOMAS J III BEEBE, STUART J Name: Name: Address: 450 S. ORANGE AVENUE Address: 420 S. ORANGE AVENUE, SUITE 500

City-St-Zip: ORLANDO, FL 328013336 City-St-Zip: ORLANDO, FL 328013336

Title: MGR () Delete Title: () Change () Addition

Name: ANGELO, BERNARD J Name: Address: 445 BROAD HOLLOW RD Address: City-St-Zip: MELVILLE, NY 11747 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

STIDD, ANDREW L Name: Name: 445 BROAD HOLLOW RD Address: Address: City-St-Zip: MELVILLE, NY 11747 City-St-Zip:

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STUART J. BEEBE 04/25/2006