

# 2009 LIMITED PARTNERSHIP ANNUAL REPORT

**FILED**  
**Apr 09, 2009**  
**Secretary of State**

DOCUMENT# A05000000887

**Entity Name:** TSC LAKE RIDGE II, LTD.

**Current Principal Place of Business:**

333 CAMINO GARDENS BOULEVARD  
SUITE 200  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

333 CAMINO GARDENS BOULEVARD  
SUITE 200  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 20-2805973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLEMAN, T. SCOTT  
333 CAMINO GARDENS BOULEVARD, STE 200  
BOCA RATON, FL 33432 US

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

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

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: P05000065750  
Name: TSC LAKE RIDGE II, INC.  
Address: 333 CAMINO GARDENS BOULEVARD, STE 200  
City-St-Zip: BOCA RATON, FL 33432 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: T. SCOTT COLEMAN

P

04/09/2009

Electronic Signature of Signing General Partner

\_\_\_\_\_ Date