

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

UBR 1004-100

DOCUMENT # A09928



1. Entity Name
COUNTRY SQUARE APARTMENTS II, LTD.

FILED
2003 MAR -5 AM 11:54
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Principal Place of Business GROVE AT LAKE LAND SQUARE 3570 US HWY 98 N. LAKE LAND FL 33809	Mailing Address GROVE AT LAKE LAND SQUARE 3570 US HWY 98 N. LAKE LAND FL 33809
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DUE BY MAY 1, 2003

4. FEI Number **59-2083511** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BARCAP REALTY SERVICES GROUP, INC.
GROVE AT LAKE LAND SQUARE
3570 US HWY 98 N.
LAKE LAND FL 33809**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

9. Capital Contributions as Shown on record. **\$880,005.00** 10. Amount of Capital Contributions in FLORIDA to date. 11. **MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION**

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P98000021244	STREET ADDRESS	
NAME	BARON COUNTRY SQUARE II, INC.	CITY-ST-ZIP	
STREET ADDRESS	7826 COOPER ROAD		
CITY-ST-ZIP	MONTGOMERY OH 45242		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	700013549617
STREET ADDRESS			03/05/03--01055--022 **535.00
CITY-ST-ZIP			
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CITY-ST-ZIP			

CR2E003 (10/02)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE REQUIRED 2/25/03

STAPLE CHECK HERE