

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # A24313**

1. Entity Name  
**PINE RIDGE ASSOCIATES II, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 FEB 29 PM 12:52

Principal Place of Business C/O NDC REALTY INVESTMENTS, INC. 4415 FIFTH AVE. PITTSBURGH PA 15213	Mailing Address C/O NDC REALTY INVESTMENTS, INC. 4415 FIFTH AVE. PITTSBURGH PA 15213-2654
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-2791317</b>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State		City & State			
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent <b>ANSBACHER, LEWIS 4215 SOUTHPPOINT BLVD, SUITE 100 JACKSONVILLE FL 32216</b>			7. Name and Address of New Registered Agent		
			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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. <b>\$378,707.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>0.00</b>	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 # NAME STREET ADDRESS CITY - ST - ZIP	<b>H34759 WESTCO MANAGEMENT, INC. 4415 FIFTH AVE. PITTSBURGH PA</b>	STREET ADDRESS	
		CITY - ST - ZIP	<b>Mj 3/9/00</b>
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	<b>P31335 NDC REALTY INVESTMENTS, INC. 4415 FIFTH AVE. PITTSBURGH PA</b>	STREET ADDRESS	
		CITY - ST - ZIP	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS	<b>300003168973---7 03/14/00 01076 001 ****141.25 ****141.25</b>
		CITY - ST - ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS	
		CITY - ST - ZIP	

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: Diane C. Connor, v.p. Westco Management, Inc. **SIGNATURE REQUIRED** 2-23-00 412-578-7800  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)