

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 05 FEB 14 AM 11:53

| | | | | |
|---|------------------------------|--|-------------------------------|---|
| DOCUMENT # A24313 | | | |  |
| 1. Entity Name PINE RIDGE ASSOCIATES II, LTD. | | | | |
| 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 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | |
| City & State | | City & State | | |
| Zip | Country | Zip | Country | |
| | | 01042005 | Chg-LP CR2E003 (10/03) | |
| | | 4. FEI Number 59-2791317 | Applied For Not Applicable | |
| | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | |
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | | |
| ANSBACHER, LEWIS 5150 BELFORT ROAD, BLDG 100 JACKSONVILLE, FL 32256 | | Name Ansbacher & Schneider, P.A. Street Address (P.O. Box Number is Not Acceptable) 5150 Belfort Road Building 100 City Jacksonville FL Zip Code 32256 | | |
| 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 2/3/2005 | | |
| 9. Capital Contributions as Shown on record. \$378,707.00 | | 10. Amount of Capital Contributions in FLORIDA to date. | | |
| 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 # | H34759 | STREET ADDRESS | | |
| NAME | WESTCO MANAGEMENT, INC. | CITY-ST-ZIP | | |
| STREET ADDRESS | 4415 FIFTH AVE. | | | |
| CITY-ST-ZIP | PITTSBURGH, PA | | | |
| DOCUMENT # | P31335 | STREET ADDRESS | | |
| NAME | NDC REALTY INVESTMENTS, INC. | CITY-ST-ZIP | | |
| STREET ADDRESS | 4415 FIFTH AVE. | | | |
| CITY-ST-ZIP | PITTSBURGH, PA | | | |
| DOCUMENT # | | STREET ADDRESS | | |
| NAME | | CITY-ST-ZIP | | |
| STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | | |
| DOCUMENT # | | STREET ADDRESS | 900047024209 | |
| NAME | | CITY-ST-ZIP | 02/22/05--01008--024 **526.25 | |
| STREET ADDRESS | | | | |
| CITY-ST-ZIP | | | | |
| DOCUMENT # | | STREET ADDRESS | | |
| NAME | | CITY-ST-ZIP | | |
| STREET ADDRESS | | | | |
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| DOCUMENT # | | STREET ADDRESS | | |
| NAME | | 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:  Vice President | | Date | 4-8-05 | |
| | | Date | 412-578-7891 | |
| | | Date | | |

STAPLE CHECK HERE