

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 23 PM 1:57



1. Name of Limited Partnership NOBLE PROPERTIES II, LTD.	1a. DOCUMENT # A94000000918
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Mailing Address 5821 LAKE WORTH ROAD LAKE WORTH FL 33463	Principal Office Address 5821 LAKE WORTH ROAD LAKE WORTH FL 33463	3. Date Formed or Registered 07/11/1994	5a. Capital Contributions as Shown on record \$30.00
2. Mailing Address 5821-C Lake Worth Road Suite, Apt. #, etc.	2a. Principal Office Address 5821-C Lake Worth Road Suite, Apt. #, etc.	3a. Date of Last Report 01/30/1996	5b. Amount of Capital Contributions in FLORIDA to date.
City & State Greenacres, FL	City & State Greenacres, FL	4. State or Country of Formation FL	6. FEI Number 65-0516595 ☐ Applied For ☐ Not Applicable
Zip 33463-3209 U.S.A.	Zip 33463-3209 U.S.A.	7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent ALEXANDER, KAREN L ESQUIRE C/O ALEXANDER, DAMBRA & DUHL, P.A. 5737 OKEECHOBEE BLVD., SUITE 201 WEST PALM BEACH FL 33417	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) NOBLE MANAGEMENT COMPANY	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 5821 LAKE WORTH ROAD 5821-C	11b. City, State & Zip Code LAKE WORTH FL 33463-3209 Greenacres	11c. Registration/Document Number P92000013479 900002046489--8 -01/06/97--01024--013 ***191.25 ***191.25
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *A. Carpenter, Treasurer of Noble Mgt. (g/p)* DATE **12/19/96**
Typed or Printed Name of General Partner Signing Form **A. Carpenter, Treasurer of Noble Management (general partner)** Daytime Telephone Number **(561) 966-0070**