
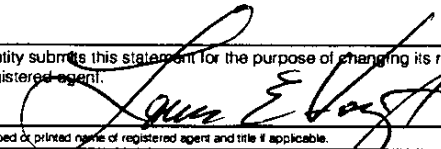


**2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007**

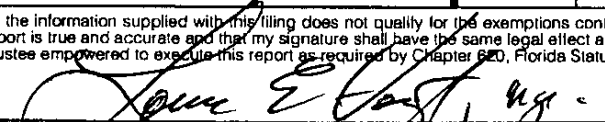
FILED

07 MAY 18 PM 4: 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A96000002172				
1. Entity Name POINTE VISTA II, LTD.				
Principal Place of Business 800 NORTH HIGHLAND AVE., SUITE 200 ORLANDO, FL 32803		Mailing Address 707 MENDHAM BLVD STE 201 ORLANDO, FL 32825		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3414230
				Applied For <input type="checkbox"/> 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	
LAGER, JILL 1665 PALM BEACH LAKES BLVD STE 400 WEST PALM BEACH, FL 33401			Name LOUIS E. VOST	
			Street Address (P.O. Box Number is Not Acceptable) 707 MENDHAM BLVD. STE 201	
			City ORLANDO	FL 32825 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 04/09/07	
Signature, typed or printed name of registered agent and title if applicable.			DATE	
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00				
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	L0600069655 BRM POINTE VISTA II, LLC. 707 MENDHAM BLVD STE 201 ORLANDO, FL 32825		STREET ADDRESS	100103628861
			CITY-ST-ZIP	05/31/07--01054--002 **500.00
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	
			CITY-ST-ZIP	
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			CITY-ST-ZIP	
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			CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

 **04/09/07** **407-377-0600**
DATE

By: BRM POINTE VISTA II, LLC, LOUIS E. VOST, MGR