2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY -1 AM 9:39

DOCUMENT # A98000002029

1. Entity Name
DADELAND CENTRE II, LTD.

Principal Place of Business	Mailing Address
9155 S. DADELAND BLVD., SUITE 1812 MIAMI, FL 33156	9155 S. DADELAND BLVD., SUITE 1812 MIAMI, FL 33156

04182006 Chg-LP CR2E003 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3533487 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GREEN, ELIZABETH A
9155 SOUTH DADELAND BLVD.
SUITE 1812
MIAMI, FL 33156

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. 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.

FILE NOW!!! FEE IS $500.00
After May 1, 2006, 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 #	P98000075332	STREET ADDRESS	*NAME CHANGED TO:
NAME	~~GREEN DADELAND HOTEL, INC.~~ *	CITY-ST-ZIP	DADELAND CENTRE II, INC.
STREET ADDRESS	9155 S. DADELAND BLVD., SUITE 1812		on 12/5/05
CITY-ST-ZIP	MIAMI, FL 33156		(See attached backup)
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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

SIGNATURE: By: DADELAND CENTRE II, INC. Elizabeth A. Green 4/17/06 (305)670-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Elizabeth A. Green, Vice President