


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

<b>DOCUMENT # A02000000415</b>			
1. Entity Name <b>G.L. HOMES OF NAPLES ASSOCIATES II, LTD.</b>			
Principal Place of Business <b>1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071</b>		Mailing Address <b>1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

**FILED**  
**05 MAY -6 PM 12:21**  
**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



1ST MOORE CR2E003 (10/04)

4. FEI Number <b>57-1139851</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>		<b>7. Name and Address of New Registered Agent</b>	
<b>G.L. HOMES OF NAPLES II CORPORATION 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

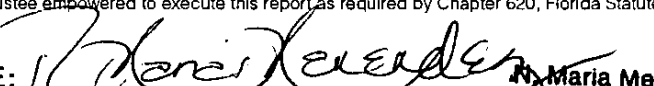
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		<b>11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.</b>
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
9. Capital Contributions as Shown on record. <b>\$15,952,385.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>\$ 19,623,735.00</b>	

**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.**

<b>12. GENERAL PARTNER INFORMATION</b>		<b>13. ADDRESS CHANGES ONLY</b>	
DOCUMENT #	P02000030560	STREET ADDRESS	
NAME	G.L. HOMES OF NAPLES II CORPORATON	CITY-ST-ZIP	
STREET ADDRESS	1401 UNIVERSITY DRIVE SUITE 200		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

**000054010178**  
**05/06/05--01074--009 \*\*526.25**

STAPLE CHECK HERE

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	
<b>SIGNATURE:</b> 	<b>4/28/05</b> <b>Maria Menendez, Vice President</b> <b>(954) 753-1730</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	