## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

STAPLE CHECK HERE

STREET ADDRESS

CITY-ST-ZiP

## FILED **DOCUMENT # A02000000757** .04 MAY 11 PM 1:20 EAST SIDE VILLAGE-FORT LAUDERDALE LIMITED PARTNERSHIP , SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 16133 VENTURA BLVD., SUITE 1400 16133 VENTURA BLVD., SUITE 1400 ENCINO, CA 91436 ENCINO, CA 91436 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03152004 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For APPLIED FOR Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 E. PARK AVENUE TALLAHASSEE, FL 32301 City 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 Signature, typed or pris DATE 10. Amount of Capital Contributions in FLORIDA to date. 4,284,352.41 9. Capital Contributions as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. L98000003194 DOCUMENT # STREET ADDRESS FL MSII/SEPII GP, L.C. NAME STREET ADDRESS 16133 VENTURA BLVD., SUITE 1400 CITY-ST-ZIP CITY-ST-ZIP ENCINO; CA 91436 DOCUMENT # 900036053849 STREET ADDRESS NAME 05/11/04--01039--002 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT / STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME

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

CATY-ST-ZIP

SIGNATURE:	SEE SIGNATURE BLOCK	4/21/04	818-385-0005
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date	Daytime Phone #

FILED

Form: 2004 UNIFORM BUSINESS REPORT

04 MAY 11 PM 1:20

EAST SIDE VILLAGE-FT. LAUDERDALE, LIMITED PARTNERSHIP TARY OF STATE A Florida Limited Partnership

Date: 04/20/04

By: FL MSII/SEPII GP, L.C.

A Florida Limited Liability Company

General Partner

By: Hearthstone

A California Corporation

Manager

> Chief Financial Officer And Senior Vice President