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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # A02000001405

1. Entity Name
B.C.R. FAMILY LIMITED PARTNERSHIP II

Principal Place of Business	Mailing Address
4634 CARLTON DUNES, UNIT 14 AMELIA ISLAND, FL 32034	4634 CARLTON DUNES, UNIT 14 AMELIA ISLAND, FL 32034

07202004 Chg-LP CR2E003 (10/03)

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: APPLIED FOR — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RIDGE, GEORGE E 200 WEST FORSYTH STREET, SUITE 1200 JACKSONVILLE, FL 32202	Name: John R. Crawford Street Address (P.O. Box Number Is Not Acceptable): 1200 Riverplace Blvd Suite 860 City: Jacksonville FL Zip Code 32207

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] 7/28/04
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.
$900,000.00		

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	ROBERTS, BERT C JR. 4634 CARLTON DUNES, UNIT 14 AMELIA ISLAND, FL 32034	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	ROBERTS, PATRICIA M 4834 CARLTON DUNES, UNIT 14 AMELIA ISLAND, FL 32034	STREET ADDRESS CITY-ST-ZIP	900039949379 ~~08/06/04 01040 017 **526.25~~
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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.

SIGNATURE: Bert C Robert 7/20/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Bert C Robert 7/20/04

A02000001405

B.C.R. FAMILY LIMITED PARTNERSHIP II
4634 Carlton Dunes, Unit 14
Amelia Island, FL 32034

July 20, 2004

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To Secretary of State

Please be advised that the annual report filing notice was not received.

This partnership has not been dissolved and the annual report is attached.

Thank you.

Sincerely,

Bert C. Roberts, Jr.
General Partner