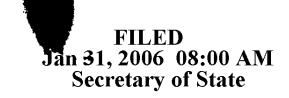
2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006 DOCUMENT # A03000000458 1. Entity Name . BIG PINE KEY II LIMITED PARTNERSHIP Principal Place of Business Mailing Address 241 CLONMELL-UPLAND ROAD 1115 LONG BEACH DRIVE BIG PINE KEY, FL 33043 WEST GROVE, PA 19390





DO NOT WRITE IN THIS SPACE

01092006 No Chg-LP CR2E003 (11/05) 4. FEI Number Applied For 20-0288099 Not Applicable

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

	· · · · · · · · · · · · · · · · · · ·	6. Name and Address of Current Registered Agent		
1		DONALD 3 BEACH DRIVE KEY, FL 33043	DO NOT WRITE IN THIS SPACE	
	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			
\perp	Signature, typed or printed name of registered agent and this if applicable.		DATE	
		FILE NOW!!! FEE 18 \$500.00 After May 1, 2005, Fee will be \$900.0	0	
	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		
5	DOCUMENT # NAME STREET ADDRESS	P97000095578 UNIONVILLE, INC. 1115 LONG BEACH DRIVE	HUUNGG AGS N 56	
1	DOCUMENT # NAME STREET ADDRESS DITY-SI-ZIP	BIG PINE KEY, FL 33043	8079779123 81/20/ 41/ 08032-888 50.08	
,	DECUMENT # NAME STREET AGORESS CITY-ST-ZIP		DO NOT WRITE	
1	DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	DOCUMENT I NAME STREET ADDRESS CKTY-ST-ZIP		U00000411943 02/10/06-80027~014 50/0.00	
STA	DOCUMENT # NAME STREET ADDRESS CITY-ST- DP			

14. I hereby certify that the information supplied with this filling 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 it 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:

ES OR PRINTED NAME OF MORING GENERAL PANTHER

DONTAYIOR 119/06 610-869-56