


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
05 APR 29 AM 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A03000001149					
1. Entity Name EAGLE ENERGY DEVELOPMENT 2003-II LIMITED PARTNERSHIP					
Principal Place of Business 711 HAWKSBILL ISLAND DR SATELLITE BEACH, FL 32937			Mailing Address 711 HAWKSBILL ISLAND DR SATELLITE BEACH, FL 32937		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc. 2194 HIGHWAY A1A STE 301			Suite, Apt. #, etc. 2194 HIGHWAY A1A STE 301		
City & State INDIAN HARBOUR BEACH, FL			City & State INDIAN HARBOUR BEACH, FL		
Zip 32937		Country USA		Zip 32937	
Country USA					
4. FEI Number 02-0701701			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
STILLIE, EDWARD L 711 HAWKSBILL ISLAND DR SATELLITE BEACH, FL 32937			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$2,000,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	P02000021042		STREET ADDRESS		
NAME	EAGLE ENERGY, INC		CITY-ST-ZIP		
STREET ADDRESS	711 HAWKSBILL ISLAND DR				
CITY-ST-ZIP	SATELLITE BEACH, FL 32937				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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STREET ADDRESS					
CITY-ST-ZIP					
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: Edward L. Stillie			EDWARD L. STILLIE 04/27/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE

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