


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**

**Apr 30, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A03000001185</b>	
1. Entity Name NEBUS FAMILY LIMITED PARTNERSHIP PHASE TWO, LTD.	

Principal Place of Business 3100 NORTH ROAD NAPLES, FL 34104	Mailing Address 3100 NORTH ROAD NAPLES, FL 34104
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04212005 Chg-LP CR2E003 (10/03)

4. FEI Number 54-2129505	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  STEWART, JAMES C JR 9180 GALLERIA COURT NAPLES, FL 34109
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7. Name and Address of New Registered Agent	
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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. \$999,990.00	10. Amount of Capital Contributions in FLORIDA to date. 999,990
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**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 #	P04000007546	STREET ADDRESS	
NAME	ROCK CREEK PHASE II CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	3100 NORTH ROAD		
CITY-ST-ZIP	NAPLES, FL 34104		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP			

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04/30/05 80050 017 525.25

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: <i>Joanne Nebus</i>	JOANNE NEBUS PARTNER	Date: 4-22-05	Daytime Phone #
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