

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

|   |  |
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| DOCUMENT # A03000001596                           |  |
| 1. Entity Name<br>LAKE AUSTIN PROPERTIES II, LTD. |  |



**FILED**

04 MAY -3 PM 6:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



|   |   |
|---|---|
| Principal Place of Business<br>1503 WEST SMITH ST.<br>ORLANDO, FL 32804 | Mailing Address<br>1503 WEST SMITH ST.<br>ORLANDO, FL 32804 |
|---|---|

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| 2. Principal Place of Business<br>7512 Dr. Phillips Blvd<br>Suite, Apt. #, etc.<br>Ste 50, Mail Box 514<br>City & State<br>Orlando, FL<br>Zip<br>32819 | 3. Mailing Address<br>7512 Dr. Phillips Blvd<br>Suite, Apt. #, etc.<br>Ste 50, Mail Box 514<br>City & State<br>Orlando, FL<br>Zip<br>32819 |
| Country<br>USA   | Country<br>USA   |

04222004 Chg-LP CR2E003 (10/03)

4. FEI Number  
20-1051426

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

|  |  |
|--|--|
| 6. Name and Address of Current Registered Agent<br>STAMP, MARTIN F<br>C/O KILGORE PEARLMAN<br>2 SOUTH ORANGE AVE, 5TH FLOOR<br>ORLANDO, FL 32801 | 7. Name and Address of New Registered Agent<br>Name<br>DUPREEZ, GEORGE<br>Street Address (P.O. Box Number is Not Acceptable)<br>7512 Dr. Phillips Blvd, Ste 50<br>City<br>Orlando<br>FL<br>Zip Code<br>32819 |
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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 GEORGE F. DUPREEZ 4-30-04  
Signature, typed or printed name of registered agent and title if applicable. DATE

|   |   |
|---|---|
| 9. Capital Contributions as Shown on record. \$2,000.00 | 10. Amount of Capital Contributions in FLORIDA to date. |
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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 #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P01000004996<br>GFD, INC.<br>1503 WEST SMITH ST.<br>ORLANDO, FL 32804 | STREET ADDRESS<br>CITY-ST-ZIP | 7512 Dr. Phillips Blvd, Ste 50<br>Orlando, FL 32819 |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | STREET ADDRESS<br>CITY-ST-ZIP |   |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | STREET ADDRESS<br>CITY-ST-ZIP |   |
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| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | STREET ADDRESS<br>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: GEORGE F. DUPREEZ 4-30-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

**GENERAL PARTNER**

STAPLE CHECK HERE