

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A05000000078


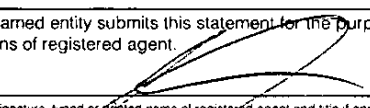
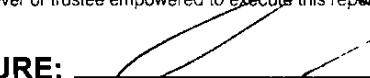
1. Entity Name
BUTTERS REAL ESTATE FUND II, LTD.



FILED

06 MAY -1 PM 1:20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business <u>6820 LYONS TECHNOLOGY CIRCLE</u>		3. Mailing Address <u>6820 LYONS TECHNOLOGY CIRCLE</u>			
Suite, Apt. #, etc. <u>#100</u>		Suite, Apt. #, etc. <u>#100</u>		04202006 Chg-LP CR2E003 (11/05)	
City & State <u>COCONUT CREEK, FL</u>		City & State <u>COCONUT CREEK, FL</u>		4. FEI Number <u>22-3905397</u>	
Zip <u>33073</u>		Zip <u>33073</u>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country <u>USA</u>		Country <u>USA</u>		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BUTTERS, MALCOLM 4811 LYONS TECHNOLOGY PARKWAY, SUITE 6 COCONUT CREEK, FL 33073				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				<u>6820 LYONS TECHNOLOGY CIRCLE #100</u>	
				City <u>COCONUT CREEK</u> FL Zip Code <u>33073</u>	
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, typed or printed name of registered agent and title if applicable.				M. BUTTERS 04/28/06 DATE	
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00					
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 #	L05000001850			STREET ADDRESS	<u>6820 LYONS TECHNOLOGY CIRCLE #100</u>
NAME	BUTTERS CAPITAL II, LLC			CITY - ST - ZIP	
STREET ADDRESS	4811 LYONS TECHNOLOGY PARKWAY, SUITE 6				<u>COCONUT CREEK, FL - 33073</u>
CITY - ST - ZIP	COCONUT CREEK, FL 33073				
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 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 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER				M. BUTTERS 04/28/06 954-570-8111 Date Daytime Phone #	