

# **2008 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000000183

**FILED**  
**Jan 09, 2008**  
**Secretary of State**

**Entity Name:** CREATIVE AESTHETICS II, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

47 S. PALM AVENUE  
302  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

47 S. PALM AVENUE  
302  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 20-2228075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRECOURT, BRIAN G  
4327 DES PLAINES DRIVE  
SARASOTA, FL 34233 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: PRECOURT, BRIAN G  
Address: 4327 DES PLAINES DRIVE  
City-St-Zip: SARASOTA, FL 34233

Document #:

Name: ALFANO, NEAL  
Address: 6090 MEDICI COURT, APT 101  
City-St-Zip: SARASOTA, FL 34243

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address: 8335 38TH STREET CIR. E., UNIT 306  
City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: NEAL ALFANO

GP

01/09/2008

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date