


2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # A05898 1. Entity Name VILLAGE GREEN APARTMENTS, LTD., NO.II	
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Principal Place of Business RR 1, BOX 680 FAIRFAX, VT 05454	Mailing Address C/O ELIZABETH STRZELECKI P.O. BOX 8347 LAKESHORE, FL 33854-8347
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01042008 No Chg-LP CR2E003 (12/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For 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

ELIZABETH STRZELECKI
VILLAGE GREEN APARTMENTS
CLUB CIRCLE
LAKESHORE, FL 33854

DO NOT WRITE IN THIS SPACE

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 ELIZABETH STRZELECKI Elizabeth Strzelecki DATE 4/8/08

Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$500.00
After May 1, 2008, 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	
DOCUMENT #	A02476
NAME	LAKEHAVEN APT.ASSOCIATES
STREET ADDRESS	RR1 BOX 680
CITY- ST- ZIP	FAIRFAX, VT
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
DOCUMENT #	
NAME	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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04/22/08-80106-012 8.75

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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: X MARK RUBIN DATE 4/8/08 DAYTIME PHONE # 305-538-4314

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE