## 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Feb 05, 2007 08:00 AM Secretary of State

DOCU		

1. Entity Name EASTWOOD APARTMENTS, LTD. II



Principal Place of Business

300 WEST DIXIE AVENUE LEESBURG, FL 34748 Mailing Address

300 WEST DIXIE AVENUE LEESBURG, FL 34748



01312007 No Chg-LP

CR2E003 (12/06)

4. FEI Number 59-1879709

Applied For Not Applicable

5. Certificate of Status Desired

Ø

\$8.75 Additional Fee Required

Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HABER, FLORA JO 300 WEST DIXIE AVENUE LEESBURG, FL 32748

## DO NOT WRITE IN THIS SPACE

LLESBONO, 1 E 32140		IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the purpose of changing its regions of registered agent.	sistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and title d applicable DATE				
	FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.0	000000624280 02/14/07-80026-006 508 75		
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 / NAME STREET ADDRESS CITY-ST-ZIP	HABER, FLORA JO 300 WEST DIXIE AVE. LEESBURG, FL			
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS				

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 HAME OF SIGNING GENERAL PARTNER

1-31-07

(352) 187-6700