

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 NOV 12 AM 9:43 11/15

1. Name of Limited Partnership

1a. DOCUMENT #
A19599

FLORIDA PRINCETON MEADOWS II ASSOCIATES, LTD.



Mailing Address
**1505 FEDERAL ST.
P.O. BOX 1920
DALLAS TX 75201**

Principal Office Address
**1505 FEDERAL ST.
P.O. BOX 1920
DALLAS TX 75201**

3. Date Formed or Registered
03/29/1985

5a. Capital Contributions as
Shown on record.
\$2,178,225.00

3a. Date of Last Report
12/20/1995

5b. Amount of Capital
Contributions in FLORIDA
to date.
2,178,225.00

2. Mailing Address

2a. Principal Office Address

4. State or Country of Formation
FL

☐ Applied For
☐ Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. FEI Number
75-2058476

City & State

City & State

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

Zip

Country

Zip

Country

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

LINCOLN PROPERTY COMPANY

1505 FEDERAL ST.

DALLAS TX

A19598

600002009996--0
-11/20/96--01085--021
***576.25 ***576.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information is made available to the public. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

**J. V. MACDONALD
ATTORNEY-IN-FACT
FOR MACK POGUE**

SIGNATURE *Janelle J. Macdonald*

DATE **11-1-96**

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

(214) 740-4440

CR2E003 (6/96)