FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

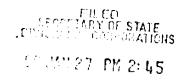
Secretary of State DIVISION OF CORPORATIONS

1	Name	of	Limited	Partnership
	Harrie	O.	Datumen	ra tileisnit

DOCUMENT # A19888

LEESBURG RRH, LTD. II

ga-APICUS



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Mailing Address		Principal Office Address		
P.O. BOX 10293		P.O. BOX 10293		
CLEARWATER FL 337	57	CLEARWATER FL 33757		
2. Mailing Address		2a, Principal Office	 Address	
Suite, Apt #, etc		Suite, Apt #, etc		
City & State		City & State		
Zip	Country	Zip	Country	
		1		

3. Date Formed or Registered	5a. Capital Contributions as Snown on record
05/09/1985 3a. Date of Last Report	\$100.00
06/29/1998 4. Stafe or Country of Formation	5b. Amount of Capital Contributions in ELOR(1)A to date
FL 6. FLE Number	Applied For
59-2891069 7. Certificate of Status Decired	Not Applicable
_	\$8.75 Additional Fee Require 1 State (Secreverse size for fee informal on,

9. Name and Address of Current Registered Agent If changed, now Registered Apent/Office ROE, THOMAS Street Address (P.O. Box Number Is Not Acceptable) **66 HERALD DRIVE LEESBURG FL 34748**

10a. Pursuant to the provisions of sections 620 1051 and 620 192, Fiorida Statutes, the above named limited partnership organized or registered under the laws of the State of Fiorida, 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). Thereby account the appointment of registered agent I am familiar with, and accept the obligations of section 620 192, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

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

City, State & Zip Code

11c. Registration/ Document Number

ROE, THOMAS

403-E SOMERSET DRIVE

DERIDDER LA 70634

1 CHORDICUS 17 C.S. 412:3 - - 7 -02/05/39 - 01013--010 ****150.00 - ****150.00

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 doos not qualify for the exemption stated in Section 119 07(3)(k). Florida Stated in Section 119 07(3)(k). Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 bath. I further contributes that am a General Partner of the limited partnership, received or trustee empowered to execute this report as regarded by chapter 620, Florida Statutes

Typed or Printed Name of General Partner Signing Form

DATE 12-20-98