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

1a. DOCUMENT # **A20208**

FILED

98 NOV 20 PM 2:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

				TALLAHASSEE, FLORIDA			
HASKELL REALTY DEVELOPERS, LTD. II							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital C	ontributions as	7
111 RIVERSIDE AVE P.O. BOX 44100 JACKSONVILLE FL 32231-4100	111 RIVERSIDE AVE P.O. BOX 44100 JACKSONVILLE FL 32231-4100			06/24/1985 3a. Date of Last Report 01/06/1998	\$0.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date.		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number		Applied For	\dashv
City & State	City & State			59-2608061 7. Certificate of Status Desired		Not Applicable	_
Zip Country	Zip Country			\$8.75 Additional Fee Required of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent				10. If changed, new Registered Agent/Office			
VANDERGRIFF, C. EDWARD 111 RIVERSIDE AVE JACKSONVILLE FL 32202-4950		Name					-
		Street Address (P.O. Box Number Is Not Acceptable)					-
		Suite, Apt. #, etc.					-
			City Zip Code				
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 pariner(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 (Do NOT Use Post Office Box	Partner	11b.	City, State & Zip Code	11c. D	Registration/ ocument Number	7
HASKELL DEVELOPEMENT,INC			JACKSONVILLE FL 800026 -11/24/ ****150				CR2E003 (8/98)
				: [A	- Nov 2	≱U 199 8 ∤	_
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 the the Information supplied with this filing is pre-matrity furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Floride Statutes. I release the Division of Corporations from any Isability of non-compliance with Section 119.07(3)(k) in livine 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 acceptate and that my significance shall have the same legal effects so 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. SIGNATURE							
Typed or Printed Name of General Portion Stigning Form C. Edward Vandergriff			Daytime Telephone Number (904) 791–4500				
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