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		FILED 98 NOV -5 AM 9: 48				
1. Name of Limited Partnership	1a. DOCUMENT # A20561			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
WELLINGTON REAL ESTATE FUND LTD. II			,				
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capit	al Contributions as	
\$597 TRELLIS LANE FORT MYERS FL 33919	5597 TRELLIS LANE FORT MYERS FL 33919			08/13/1985 3a. Date of Last Report	\$150,000.00		
2. Mailing Address	2a. Principal Office Address			10/27/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number	<u> </u>		
				59-2554591		Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired		\$8,75 Additional		
Zip Country	Zip Country			8. Make check payable to: Dept. of S	State (See revo	Fee Required	
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office							
Name							
MURTY, TIMOTHY J ESQ. 1633 PERIWINKEL WAY, SUITE A			ess (P.O. Bo	ox Number Is Not Acceptable)			
SANIBEL FL 33957	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 x Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
MURWICK PROPERTIES	5597 TRELLIS LANE		FT. MYERS FL 33919		G9	G93068900009	
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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 filling 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 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 cath. 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 Constituent DATE 10/26/95							
Typed or Printed Name of General Partner Signing Form Danger T. Sociations Company Dayline Telephone Number 941-433-0900							