

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A24719

FILED
Apr 28, 2006
Secretary of State

Entity Name: N.S.I. INCOME FUND II - WESTWINDS APARTMENTS LIMITED PARTNERSHIP

Current Principal Place of Business:

5215 S. WESTSHORE BLVD. #29
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

5215 S. WESTSHORE BLVD. #29
TAMPA, FL 33611

New Mailing Address:

FEI Number: 31-1205639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POSTON, WILLIAM G
C/O NSI MANAGEMENT, INC.
5215 S. WESTSHORE BLVD. #29
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #:

Name: O'NEILL, PATRICK J.
Address: 26657 WOODWARD AVE., STE. 100
City-St-Zip: HUNTINGTON WOODS, MI 48070
Document #: P13599

Name: NORTHERN SALINE, INC.
Address: 26657 WOODWARD AVE., STE. 100
City-St-Zip: HUNTINGTON, MI 48070

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM G. POSTON

RA

04/28/2006

Electronic Signature of Signing General Partner

Date