2008 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A24719

FILED Apr 03, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

4820 GANDY BLVD. 2420 ENTERPRISE RD.

TAMPA, FL 33611 SUITE 201

CLEARWATER, FL 33763

Current Mailing Address: New Mailing Address:

4820 GANDY BLVD. 2420 ENTERPRISE RD.

TAMPA, FL 33611 SUITE 201

CLEARWATER, FL 33763

FEI Number: 31-1205639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POSTON, WILLIAM G GAINES, SHARI A 2420 ENTERPRISE RD. C/O NSI MANAGEMENT, INC.

4820 GANDY BLVD SUITE 201

CLEARWATER, FL 33763 US TAMPA, FL 33611 US

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: SHARI A. GAINES 04/03/2008

> Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

O'NEILL, PATRICK J. Name:

26657 WOODWARD AVE., STE. 100 Address: Address: City-St-Zip: HUNTINGTON WOODS, MI 48070 City-St-Zip:

Document #: P13599

NORTHERN SALINE, INC. Name:

26657 WOODWARD AVE., STE. 100 Address: Address: City-St-Zip: HUNITINGTON, MI 48070 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

GΡ SIGNATURE: PATRICK J. O'NEILL 04/03/2008