

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Mar 06, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A30317**

1. Entity Name  
**LAUREL HILLS VILLAS II, LTD.**



Principal Place of Business  
**7010 BALBOA DRIVE  
ORLANDO, FL 32818**

Mailing Address  
**516 LAKEVIEW ROAD, UNIT 8  
CLEARWATER, FL 33756**



01152008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3019353**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WALLACE, JOSEPH P  
2946 SOUTHGATE TERRACE  
ORLANDO, FL 32818**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2008, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **744230**  
NAME **RETIRED EDUCATORS HOUSING OF ORANGE CO. INC**  
STREET ADDRESS **7010 BALBOA DRIVE**  
CITY- ST- ZIP **ORLANDO, FL**

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03/21/08-80043-004 508.75

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: JOSEPH P. WALLACE** *Joseph P. Wallace* **4/19/08** **407-297-7583**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE