

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A30787</b> 1. Entity Name HILLMOOR TOWNHOMES, A LIMITED PARTNERSHIP					
Principal Place of Business 900 BROOKSTONE CENTRE PARKWAY P.O. BOX 6566 COLUMBUS, GA 31995			Mailing Address 900 BROOKSTONE CENTRE PARKWAY P.O. BOX 6566 COLUMBUS, GA 31995		
2. Principal Place of Business Suite, Apt #, etc.			3. Mailing Address Suite, Apt #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04132005    Chg-LP    CR2E003 (10/03)	
4. FEI Number 59-1912891				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			FL    Zip Code		
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$98.00</b>			10. Amount of Capital Contributions in FLORIDA to date.		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	M99000000746		STREET ADDRESS		
NAME	FLOURNOY TAX CREDIT INVESTMENT COMPANY II		CITY-ST-ZIP		
STREET ADDRESS	900 BROOKSTONE CENTRE PARKWAY				
CITY-ST-ZIP	COLUMBUS, GA 31904				
DOCUMENT #	FLOURNOY, JOHN F		STREET ADDRESS		
NAME	900 BROOKSTONE CENTRE PARKWAY		CITY-ST-ZIP		
STREET ADDRESS	COLUMBUS, GA 31904				
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
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STREET ADDRESS					
CITY-ST-ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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					
<b>SIGNATURE:</b> <u>Jeffrey W. Johnson</u>			4/14/05    (706) 324-4000		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date    Daytime Phone #</small>		

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