2000	UNIFORM BUSI	NESS REPOF	RT (UBR)	APPROVED
DOCU	MENT # A9200	0000118	•	AND FILED
•	PAŘK II, A FLORIDA LIMITED PAR	TNERSHIP	•	00 APR -3 AMII: 27
Principal Place of Business 3711 CORTEZ ROAD WEST SUITE 300 BRADENTON FL 34210  Mailing Address 3711 CORTEZ ROAD WEST SUITE 300 BRADENTON FL 34210-3108				SECRETARY OF STATE FALL AHASSEE, FLORIDA:
2. Principal Place of Business 3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State City & St		City & State		4. FEI Number 65-0366507 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired
SCHIED	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
3711 CORTEZ ROAD WEST SUITE 300 BRADENTON FL 34210  8. The above named entity submits this statement for the purpose of changing its rec			City	FL Zip Code
SIGNATURE  Signature, typed or printed name of registered agent and title If applicable. (NOTE: Registered Agent signature required when reinstating)  9. Capital Contributions as Shown on record.  10. Amount of Capital Contributions in FLORIDA to date. **/O.****  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 13. ADDRESS CHANGES ONLY				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	MENT # 612045 NEAL COMMUNITIES, INC. 3711 CORTEZ ROAD WEST		STREET ADDRESS  CITY-ST-ZIP	4000032154441 -04/19/0001110001 ****141.25 ****141.25
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DOCUMENT# NAME			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	contifue that the information cumplied with	As filing doop not awalife for the	CITY-ST-ZIP	Section 119.07(3Vi) Florida Statutes   further certify that the information

I hereby certify that the information supplied with 13s filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 Neal Community 17/2s, No. Gov Partner.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTINER

3/30/00 Date

941.756-0677