FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PÉNALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS



AMDEV-LEE PROPERTIES II, LTD.				
Mailing Address P.O. BOX 3789	Principal Office Address +0. BOX 3789 ORLANDO FL 62862 3789 2a. Principal Office Address 1150 Louisiana Avenue Suite, Apt. #, etc. Suite #5 City & State Winter Park, FL Zip Country 32789		3. Date Formed or Registered 11/03/1993 3a. Date of Last Report 12/19/1997 4. State or Country of Formation FL 5a. Capital Contributions as Shown on record \$379,000.00 5b. Amount of Capital Contributions in FLORIDA to date \$379,000.00	
2. Mailing Address 1150 Louisiana Avenue				Contributions in FLORIDA to date
Suite, Apt. #, etc. Suite #5 City & State			6. FEI Number 59-3209065	Applied For Not Applicable
Winter Park, FL Zip • Country 32789			7. Certificate of Status Desired 8. Make check payable to Dept of	\$8.75 Additional Fee Required State (See reverse side for fee information)
Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
-Moore, Donald L-Jr. 465 Piney Oroft Lane -Maitland FL 32751		Hugh M. Palmer Street Address (P.O. Biox Number Is Not Acceptable) 1150 Louisiana Avenue Sulte. Apt #, etc. Suite #5 City Winter Park FL Zip Code 32789		

agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes

SIGNATURE (Registered Agent Accepting Appointment)

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A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE

11.

11a. (Do NOT Use Post Office Box Numbers)

11b.

City, State & Zip Code

Registration/ 11c. Document Number

- AMDEV CORPORATION -

Name(s) of General Partner(s)

HUGH M. PALMER

297 ERNESTINE ST.

1150 Louisiana Ave. Suite #5

-ORLANDO FL 32801

Winter Park, FL 32789

G51280

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filing is voluntarily furnished and doos not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to

SIGNATURE

Hugh M. Palmer

DATE 3 2 8 9

Daylinie Telephone Number (407) 645-2030