

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # A95000000555					
1. Entity Name MYSTIC POINTE II LTD.					
Principal Place of Business 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669			Mailing Address 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt #, etc		Suite, Apt # etc			
City & State		City & State			
Zip	Country	Zip	Country	03232004 Chg-LP CR2E003 (10/03)	
4. FEI Number 59-3413037				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DAVIS, NORITA V 20721 S.W. 46TH AVENUE NEWBERRY, FL 32669			Name Street Address (P O Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>		
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 _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record \$7,057,537.00		10. Amount of Capital Contributions in FLORIDA to date 7,057,537			
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	A95000000823 DAVIS HERTIAGE, LTD. 20725 S.W. 46TH AVENUE NEWBERRY, FL 32669		STREET ADDRESS CITY- ST- ZIP	U000000157786 05/06/04-80042-012 535.00	
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP			STREET ADDRESS CITY- ST- ZIP	U00000158390 <i>Barh</i> 05/06/05-80001-012 535.00	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Stefan M. Davis</i>			3/25/04 352 472-7773		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #</small>					
Stefan M. Davis, Vice President of Earthart, Inc., the General Partner of Davis					

STAPLE CHECK HERE