FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998

1. Name of Limited Partnership



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

97 DEC 29 AM 11: 47

a. DOCUMENT # **A96000000371** IS II ROLLING HILLS ASSOCIATES, LTD.

Malling Address	Principal Office Address 1226 COMMERCE STREET, SUITE 300 DALLAS TX 75202-4328		3. Date Formed or Registered	5a. Capital Contributions as Shown on record	
1226 COMMERCE STREET, SUITE SOO			02/26/1996	\$990.00	
DALLAS TX 75202-4328			3a. Date of Last Report	Ψοσοίοο	
			12/27/1996	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address			to date:	
				<u> </u>	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 13-387 - APPLIED FOR-		
City & State	City & State		7. Certificate of Stalus Desired	☐ Not Applicable	
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required	
				8. Make check payable to: Dept. of State (See reverse side for fee informati	
9. Name and Address of Current Registered Agent		10. If changed, now Registered Agent/Office			
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301		Name			
		Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apt. #, etc.			
		City Zip Code			
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	TIS A CORPORATION	LIMITED	PARTNERSHIP OR OTHE		
MUS	ST BE REGISTERED A	ND ACTIV	E WITH THIS OFFICE.		
11. Name(s) of General Partner(s)	Address of Each Gen (Do NOT Use Post Office	Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
IS II ASSOCIATES, INC.	1226 COMMERCE STREET,		DALLAS TX 75202	P96000017302	
			500002 -01/1 ****	23997856 4/9801054025 196.25 ****156.25	
Note: General partners MAY NO	T be changed on this for				

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 senio legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustees

Typed or Printed Name of General Partner Signing Form

DATE: 12/22/47 Daytime Telephone Number 214-741-9870