

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 8, 2004**

FILED

04 AUG -5 PM 3:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



07212004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0770610 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # A96000001962

1. Entity Name  
PAULY INVESTMENTS II, LTD.



Principal Place of Business  
3801 PGA BLVD., SUITE 802  
PALM BEACH GARDENS, FL 33410

Mailing Address  
3801 PGA BLVD., SUITE 802  
PALM BEACH GARDENS, FL 33410

2. Principal Place of Business  
3801 PGA Blvd.

3. Mailing Address  
Same

Suite, Apt. #, etc.  
Suite 604

Suite, Apt. #, etc.

City & State  
Palm Beach Gardens, FL

City & State

Zip  
33410

Country  
USA

Zip

Country

6. Name and Address of Current Registered Agent

SINGER, MICHAEL S ESQUIRE  
3801 PGA BLVD., SUITE 604  
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite 604

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

7/27/04

DATE

9. Capital Contributions as Shown on record: \$132,660.00

10. Amount of Capital Contributions in FLORIDA to date.

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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

DOCUMENT # P00000081093  
NAME PAULY ENTITIES, INC.  
STREET ADDRESS 3801 PGA BLVD, STE 604  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

700040323257  
08/19/04--01031--007 \*\*526.25

DOCUMENT #  
NAME  
STREET ADDRESS  
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STREET ADDRESS

CITY-ST-ZIP

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:

John Pauly Jr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/31/04 561.309.9661

Date

Daytime Phone #

STAPLE CHECK HERE