

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000000303

Entity Name: CORAL VILLAGE II, LTD.

**FILED**  
**Mar 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FT. MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FT. MYERS, FL 33919

**New Mailing Address:**

FEI Number: 65-0814610

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARNOLD, BOWEN A  
1520 ROYAL PALM SQUARE BLVD.  
SUITE 240  
FORT MYERS, FL 33919 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: N95000001649  
Name: CAPE CORAL HOUSING REHABILITATION & DEVELO  
Address: 1714 CAPE CORAL PARKWAY EAST  
City-St-Zip: CAPE CORAL, FL 33904

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #: P98000006718  
Name: CORAL VILLAGE II, INC.  
Address: 1520 ROYAL PALM SQUARE BLVD., STE. 240  
City-St-Zip: FT. MYERS, FL 33919

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: BOWEN A. ARNOLD

RA

03/25/2012

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date