

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

A98000002760

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JAN -4 PM 4:37

1. Name of Limited Partnership Crossings at Cape Coral II, Ltd.		1a. DOCUMENT # A98000002760	
2. Mailing Address 322 Banyan Blvd. Suite, Apt. #, etc. City & State West Palm Beach, FL Zip 33401 Country USA		2a. Principal Office Address 322 Banyan Blvd. Suite, Apt. #, etc. City & State West Palm Beach, FL Zip 33401 Country USA	
3. Date Formed or Registered 12/15/98		5a. Capital Contributions as Shown on record. \$ 1,000 -	
3a. Date of Last Report N/A		5b. Amount of Capital Contributions in FLORIDA to date: \$ 1,000 -	
4. State or Country of Formation Florida		6. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent Paula J. Ryan 322 Banyan Boulevard West Palm Beach, FL 33401		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

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

11. Name(s) of General Partner(s) Crossings at Cape Coral II, Inc. White Oak Cape Coral, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 215 S. Monroe St., Suite 540 Bk 11/4/99 322 Banyan Blvd.	11b. City, State & Zip Code Tallahassee, FL 32301 3000002735863-6 -01/11/99--01008--014 ****150.00 ****150.00 West Palm Beach, FL 33401	11c. Registration/Document Number A98000101475 A98000101453
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

JEFFREY B. SHARKEY

Daytime Telephone Number

850/224-1660

CR2E003 (8/98)