


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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

04 July 27 PM 3:03

<b>DOCUMENT # A99000000298</b> 1. Entity Name <b>VINTAGE PROPERTIES XI, LTD.</b>	
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Principal Place of Business <del>5752 VINTAGE OAKS CIRCLE</del> <del>DELRAY BEACH, FL 33484</del>	Mailing Address <del>5752 VINTAGE OAKS CIRCLE</del> <del>DELRAY BEACH, FL 33484</del>
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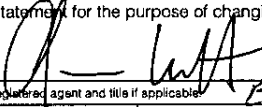
2. Principal Place of Business <b>4205 West Atlantic Ave</b> Suite, Apt. #, etc. <b>Suite 201</b> City & State <b>Delray Beach, FL</b> Zip <b>33445</b>	3. Mailing Address <b>4205 West Atlantic Ave</b> Suite, Apt. #, etc. <b>Suite 201</b> City & State <b>Delray Beach, FL</b> Zip <b>33445</b>
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03152003 Chg-LP CR2E003 (10/03)

4. FEI Number <b>65-0898256</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent <b>SUTTIN, EUGENE N</b> <del>5752 VINTAGE OAKS CIRCLE</del> <del>DELRAY BEACH, FL 33484</del> <b>4205 West Atlantic Ave.</b> <b>Suite 201</b> <b>Delray Beach, FL</b> <b>33445</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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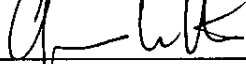
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable	DATE <b>7/22/04</b> DATE

9. Capital Contributions as Shown on record. <b>\$99.00</b>	10. Amount of Capital Contributions in FLORIDA to date.
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**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 # <b>M96362</b>	NAME <b>AZA VENTURES II, INC.</b>	STREET ADDRESS <b>4205 West Atlantic Ave., #201</b>	
STREET ADDRESS <del>5752 VINTAGE OAKS CIRCLE</del>		CITY-ST-ZIP <b>Delray Beach, FL 33445</b>	
CITY-ST-ZIP <del>DELRAY BEACH, FL 33484</del>			
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CITY-ST-ZIP			

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 220, Florida Statutes.

<b>AZA VENTURES II, INC.</b> <b>SIGNATURE: By:</b>  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <b>Eugene Suttin, President</b>	Date <b>7/22/04</b> Daytime Phone # <b>561-496-7895</b>
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