

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FL

FILED


2004 APR 12 PM 12:17

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



03182004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0952526	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DOCUMENT # A99000001175			
1. Entity Name NHPAHP DEVELOPMENT II LIMITED PARTNERSHIP			
Principal Place of Business 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH, FL 33401		Mailing Address 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH, FL 33401	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent ERBEY, JOHN R 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date. \$ 3,765,740
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P95000093148 NHPAHP DEVELOPMENT CORP. II 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH, FL 33401	STREET ADDRESS	
		CITY-ST-ZIP	
			800032515378
			04/13/04--01022--009 **526.25
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS	
		CITY-ST-ZIP	
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		CITY-ST-ZIP	
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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 620, Florida Statutes

SIGNATURE: Mark J. Nichols MARK J. NICHOLS, VP 4/1/04 561-682-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

NHPAHP DEVELOPMENT CORP. II

STAPLE CHECK HERE