


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # A99000001918 1. Entity Name EAGLE ROCK PARTNERS II, LTD.					
Principal Place of Business 1201 SOUTH ORLANDO AVENUE, SUITE 360 WINTER PARK, FL 32789			Mailing Address C/O DAVID C. STRONG P.O. BOX 276 WINTER PARK, FL 32790		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01082004 Chg-LP CR2E003 (10/03)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
STRONG, DAVID C 1201 SOUTH ORLANDO AVENUE, SUITE 360 WINTER PARK, FL 32789				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$599.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	P99000101272		STREET ADDRESS		
NAME	STRONG/EAGLE ROCK II, INC. ✓		CITY-ST-ZIP		
STREET ADDRESS	1201 SOUTH ORLANDO AVENUE, SUITE 360 ✓				
CITY-ST-ZIP	WINTER PARK, FL 32789				
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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: <i>David C. Strong</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			1/20/04 <small>Date</small>		
			409629-1800 <small>Daytime Phone #</small>		

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