

# **2009 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A99000002083

**FILED**  
**Apr 21, 2009**  
**Secretary of State**

**Entity Name:** MAGNOLIA WALK APARTMENTS II, LTD.

**Current Principal Place of Business:**

1629 NW 4TH STREET  
OCALA, FL 34475

**New Principal Place of Business:**

**Current Mailing Address:**

1629 NW 4TH STREET  
OCALA, FL 34475

**New Mailing Address:**

**FEI Number:** 59-3630761

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BARNARD, BROWNELL  
1629 NW 4TH STREET  
OCALA, FL 34475 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 #: P03000049730  
Name: MAGNOLIA WALK APARTMENTS II, INC.  
Address: 11635 N.W. 1ST AVENUE  
City-St-Zip: GAINESVILLE, FL 32607

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: BROWNELL BARNARD

GP

04/21/2009

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

\_\_\_\_\_  
Date