## 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# B0000000305

Entity Name: CMS ENTREPRENEURIAL II ASSOCIATES, L.P.

FILED Jul 12, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O CMS AFFILIATED PARTNERSHIPS
ONE BALA PLAZA, SUITE 412

C/O CMS AFFILIATED PARTNERSHIPS
111 PRESIDENTIAL BLVD., SUITE 249

BALA CYNWYD, PA 19004 BALA CYNWYD, PA 19004

Current Mailing Address: New Mailing Address:

C/O LEGAL DEPARTMENT 1926 ARCH STREET PHILADELPHIA, PA 191031484

FEI Number: 23-3003878 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

DOWNING, GRANT T ESQ. 222 WEST COMSTOCK AVE., SUITE 101 WINTER PARK, FL 32789 US

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

Capital Contributions as Shown on record: 60.00 Amount of Capital Contributions in Florida to date: 60.00

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #: F00000005220

Name: MSPS ENTREPRENEURIAL II, INC.

Address: ONE BALA PLAZA, SUITE 412 Address: 111 PRESIDENTIAL BLVD., SUITE 249

City-St-Zip: BALA CYNWYD, PA 19004 City-St-Zip: BALA CYNWYD, PA 19004

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RICHARD A. MITCHELL VP 07/12/2005