

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B09000000091

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Entity Name:** CLPF-MAGNOLIA PARK II, L.P.

**Current Principal Place of Business:**

230 PARK AVENUE  
12TH FLOOR  
NEW YORK, NY 10169

**New Principal Place of Business:**

**Current Mailing Address:**

230 PARK AVENUE  
12TH FLOOR  
NEW YORK, NY 10169

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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 #:  
Name: CLPF-MAGNOLIA PARK II GP, LLC  
Address: 230 PARK AVENUE, 12TH FLOOR  
City-St-Zip: NEW YORK, NY 10169

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby 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: CLPF-MAGNOLIA PARK II GP, LLC

GP

03/24/2011

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

\_\_\_\_\_  
Date