

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 30 AM 9:13

1. Name of Limited Partnership

1a. DOCUMENT #
B94000000519

EQUITY RESIDENTIAL PROPERTIES MANAGEMENT LIMITED
PARTNERSHIP II



Mailing Address % MARIANN DEMKOVICH 2 N. RIVERSIDE PLAZA, SUITE 450 CHICAGO IL 60606		Principal Office Address 2 NORTH RIVERSIDE PLAZA CHICAGO IL 60606		3. Date Formed or Registered 12/21/1994	5a. Capital Contributions as Shown on record. \$1,151,935.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 10/20/1997	5b. Amount of Capital Contributions in FLORIDA to date: \$ 332,231
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation IL	
City & State		City & State		6. FEI Number 36-4001552	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301	10. If changed, new Registered Agent/Office Name Lexis Document Services Inc. Street Address (P.O. Box Number Is Not Acceptable) 3953 W. W. Kelley Road Suite, Apt. #, etc. City Tallahassee Zip Code FL 32311
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *Anthony G. Moody, part 94c.* DATE 12-23-98

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s) ERP OPERATING LIMITED PARTNE	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 2 NORTH RIVERSIDE PLA CHICAGO IL 60606	11b. City, State & Zip Code CHICAGO IL 60606	11c. Registration/ Document Number B93000000305
		700002725667--9 -12/30/98--01002--001 ****437.50 ****437.50	
		700002725667--9 -12/30/98--01002--012 ***1065.00 *****88.75	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Alisa Currier

DATE 12/21/98

Typed or Printed Name of General Partner Signing Form

Asst. Sec. of GP of GP

Daytime Telephone Number 312/474-1300

Equity Residential Properties TRUST

CR2E003 (8/98)