

**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. Mortham**  
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 # <b>B94000000519</b>	
EQUITY RESIDENTIAL PROPERTIES MANAGEMENT LIMITED PARTNERSHIP II			
Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
% MARIANN DEMKOVICH 2 N. RIVERSIDE PLAZA, SUITE 450 CHICAGO IL 60606	2 NORTH RIVERSIDE PLAZA CHICAGO IL 60606	12/21/1994	\$1,151,935.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	10/20/1997	\$ 332,231
City & State	City & State	4. State or Country of Formation	6. FEI Number
Zip	Country	IL	36-4001552 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301	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

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
ERP OPERATING LIMITED PARTNE	2 NORTH RIVERSIDE PLA	CHICAGO IL 60606	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 Alsa Curran 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)