

2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

08 APR 25 AM 10:42

DOCUMENT # B97000000048 1. Entity Name POWELL PROPERTIES II, LTD.					
Principal Place of Business 626 KENTUCKY AVENUE PADUCAH, KY 42003			Mailing Address P.O. BOX 1080 PADUCAH, KY 42002-1080		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address P O Box 66 Suite, Apt. #, etc.			
City & State		City & State Hickory KY		4. FEI Number 61-1294679	
Zip	Country	Zip 42051-0066	Country USA		
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS	1809 Austin Street	
STREET ADDRESS	POWELL, GREGORY L		CITY-ST-ZIP	Austin, TX 79601	
CITY-ST-ZIP	1700 AUSTIN STREET ABILENE, TX 79601		STREET ADDRESS		
DOCUMENT #	NAME		CITY-ST-ZIP	300125591153	
STREET ADDRESS	POWELL, JOE A		04/24/08--01044--007 **500.00		
CITY-ST-ZIP	14 WEST VALE PADUCAH, KY 42001		STREET ADDRESS		
DOCUMENT #	NAME		CITY-ST-ZIP		
STREET ADDRESS	POWELL, JOE L		STREET ADDRESS		
CITY-ST-ZIP	342 GARLAND DRIVE PADUCAH, KY 42001		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS	887 Robertson Road South	
STREET ADDRESS	POWELL, PATRICK S		CITY-ST-ZIP	Murray, KY 42071	
CITY-ST-ZIP	1318 WELLS BLVD MURRAY, KY 42071		STREET ADDRESS		
DOCUMENT #	NAME		CITY-ST-ZIP		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:			Date: _____ Daytime Phone #: 270-247-3042		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE