## LIMITED FARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED

99 APR -7 AH 9: 41

1. Name of Limited Partnership	1a. DOCUMENT B9800000343	**	ran L. Pa <del>lan a</del> nu anu anu anna muu ana anu ana uu ban	
OSCEOLA DEVELOPMENT PROJECT II, LP			1 <b>50</b> 111 <b>10</b> 111 <b>50</b> 111 <b>50</b> 111 <b>10115</b> 11011 <b>11066</b> 1111 11 <b>0</b> 1	
Mailing Address  2960 VINELAND RD UNIT D KISSIMMEE FL 34746	Principal Office Address 1209 ORANGE ST. WILMINGTON DE	3. Date Formed or Registered  06/01/1998  3a. Date of Last Report	5a. Capital Contributions as Shown on record \$100.00  5b. Amount of Capital Contributions in Ft ORIDA	
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation  DE	# 1000	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For	
City & State	City & State	5 7 - 50/222 7. Certificate of Status Desired	Not Applicable \$8.75 Additional	
Zip Country	Zip Country		Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered	10. If changed, new Registered Agenl/Office	
ZBORIL, JAMES 2960 VINELAND RD., UNIT D KISSIMMEE FL 34746 Suite, Apt		eigh Williams  sss (PO flox humber is Not Acceptable) RD, Unit D  pri +  Kissimmee FL 21p Code  34746		
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).  DATE 2/15/96				
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 Pariner(s)	11a. (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
OSCEOLA TRACE II DEVELOPMENT	2960 VINELAND RD., UN	KISSIMMEE FL 34746	P98000034349	
			08344153   8899-01043001   89.00   ****150.00   8	

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

12. Ido hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes T 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 20. Florida Statutes.

SIGNATURE

URE Sough a William

DATE 2/15/28

Daytime Telephone Numbe

CKZE003 (12.98