## Edgar Filing: Mills E Nelson - Form 4

Mills E Nels Form 4										
April 20, 200									PPROVAL	
	UNITED	STATES S					COMMISSIO	N OMB Number:	3235-0287	
if no long subject to Section 1 Form 4 o Form 5 obligatio may cont	Check this box if no longer subject toJanuary 31STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16.Expires: 200Section 16. Form 4 or Form 5 obligations may continue. See InstructionSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESExpires: 200Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations may continue. See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940Investment Company Act of 1940							urs per		
(Print or Type I	Responses)									
1. Name and A Mills E Nel	Address of Reporting son	s V I	Symbol VELLS	S REAL	d Ticker or ESTATE TRUST		5. Relationship o Issuer (Cho _X_Director	eck all applicabl		
(Last) 275 DICKE					Officer (giv below)	ve title Oth below)	ner (specify			
				endment, D nth/Day/Yea	ate Origina r)	1	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
MARIETTA		Person					y More than One Reporting			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day,	ate, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Rep	oort on a separate line	e for each clas	s of secu	ırities bene	Perso inforn requir	ns who rest nation cont ed to respo sys a curren	or indirectly. Spond to the colle cained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owner securities)	d		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Der

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8		Deriva Securit Acquin (A) or Dispos of (D) (Instr. and 5)	ties red sed 3, 4,	(Month/Day/Y	ear)	(Instr. 3 and	4)	Sec (Ins
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Options	\$ 12	04/18/2007		А		500		04/18/2007	04/18/2017	Common Stock	500	6
Options	\$ 12	04/18/2007		А		500		04/18/2008	04/18/2017	Common Stock	500	6
Options	\$ 12	04/18/2007		А		500		04/18/2009	04/18/2017	Common Stock	500	6
Options	\$ 12	04/18/2007		А		500		04/18/2010	04/18/2017	Common Stock	500	0
Options	\$ 12	04/18/2007		А		500		04/18/2011	04/18/2017	Common Stock	500	9

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Mills E Nelson 275 DICKERSON ROAD MARIETTA, GA 30067	Х							
<b>A</b> 1 .								

## Signatures

E. Nelson Mills	04/20/2007			
<u>**</u> Signature of	Date			

Reporting Person Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Represents total options issued as of 04/18/2007, which were granted upon initially becoming an indendent director of Wells Real Estate Investment Trust II, Inc.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.