

2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000774

FILED
Apr 07, 2005
Secretary of State

Entity Name: TUCSON MEDICAL INVESTORS, LTD.

Current Principal Place of Business:

3399 PGA BOULEVARD, SUITE 240
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

450 S. ORANGE AVENUE
ORLANDO, FL 32801

Current Mailing Address:

3399 PGA BOULEVARD, SUITE 240
PALM BEACH GARDENS, FL 33410

New Mailing Address:

450 S. ORANGE AVENUE
SUITE 200, ATTN: AMY PATTERSON
ORLANDO, FL 32801

FEI Number: 41-2057127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIERCE, THOMAS K ESQUIRE
3399 PGA BOULEVARD, SUITE 240
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

PATTERSON, AMY J
450 S. ORANGE AVENUE
ORLANDO, FL 32801 US

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.

SIGNATURE: AMY J. PATTERSON

04/07/2005

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 1,000.00

Amount of Capital Contributions in Florida to date: 1,000.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #: M04000003178

Name: CNL RETIREMENT DAS TRANCHE I GP, LLC

Address: 450 SOUTH ORANGE AVENUE

City-St-Zip: ORLANDO, FL 32801

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THOMAS J. HUTCHISON, III

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04/07/2005

Electronic Signature of Signing General Partner

Date