

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

143

0002083 AB

DOCUMENT # **A05345**

1. Entity Name
SUNSHINE SHOPPING PARK, LIMITED



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT -7 AM 10:17

Principal Place of Business
P. O. BOX 266
PANAMA CITY FL 32402

Mailing Address
P. O. BOX 266
PANAMA CITY FL 32402



2. Principal Place of Business
2389 ST Andrews Blvd
Suite, Apt. #, etc.

3. Mailing Address
509 So Bonita Ave
Suite, Apt. #, etc.

DUE BY SEPTEMBER 24, 2003

City & State
Panama City
Zip
32405
Country

City & State
Panama City, FL
Zip
32401
Country

4. FEI Number **59-1643201**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HALL, H K
2389 ST. ANDREWS BLVD.
PANAMA CITY FL 32405

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record. **\$60,000.00**

10. Amount of Capital Contributions
in FLORIDA to date.

11. **MAKE CHECK PAYABLE TO FL. DEPT. OF STATE**
SEE REVERSE SIDE FOR FEE INFORMATION

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
CITY-ST-ZIP
HALL, HOWARD K
509 S. BONITA AVE
PANAMA CITY FL

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
FF \$508.75

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
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CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Howard K. Hall
Howard K. Hall

7/29/03

Date

850-785 7006

Daytime Phone #

CP2E003 (4/03)

STAPLE CHECK HERE

9/9/03
 Florida Dept of State
 Division of Corporations
 Registration Section
 P.O. Box 6327

Tallahassee, FL 32314-

REF # A05345

10450 ATTN - MRS BRENDA TADLOCK ADMINISTRATION

Thank you Mrs Tadlock for speaking
 with me regarding Sunbeam Shopping
 Park and the timely making of
 the Uniform Business Report -

As I said in our telephone
 conversation - the person responsible
 for seeing and handling the
 payment of the fee was no longer
 with us - I found the report
 in a stack of unopened mail
 and have to assume that it was
 not received timely. When I
 found it I completed the report
 and mailed the check & report