

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A02000000857

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** SUNSHINE FITNESS CENTERS, LLLP

**Current Principal Place of Business:**

280 SOUTH STATE ROAD 434  
SUITE 2046  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

280 SOUTH STATE ROAD 434  
SUITE 2046  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 81-0566441      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HEEKIN, JAMES F JR  
215 NORTH EOLA DRIVE  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 1,500,000.00

**Amount of Capital Contributions in Florida to date:** 1,500,000.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #: P02000067630  
Name: SUNSHINE FITNESS CENTERS, INC.  
Address: 280 SOUTH STATE ROAD 434, SUITE 1049  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: ERIC G. DORE

VP

04/28/2005

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date