

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

APR 19 PM 5:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #  
**A14339**

**SUNSHINE LAKES ASSOCIATES II, A LIMITED PARTNERSHIP**

Mailing Address

2951 28TH ST  
SUITE 2040  
SANTA MONICA CA 90405

Principal Office Address

2951 28TH ST  
SUITE 2040  
SANTA MONICA CA 90405

3. Date Formed or Registered

04/13/1983

3a. Date of Last Report

12/30/1997

4. State or Country of Formation

IN

6. FEI Number

65-0031991

5a. Capital Contributions as  
Shown on record

\$0.00

5b. Amount of Capital  
Contributions in FLORIDA  
to date

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

410000281281134-15  
-04/22/98-01093-011  
\*\*\*\*141.25 \*\*\*\*141.25  
FL

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

**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 Partner(s)

J & I MONITORING, INC.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

2951 28TH ST.#2040

11b. City, State & Zip Code

SANTA MONICA CA

11c. Registration/  
Document Number

F93000001580

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

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I 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 620, Florida Statutes.

SIGNATURE

J&I Monitoring, Inc.  
Sheldon P. Berger, President of  
Majico Management Co.

DATE

3/18/99  
310-277-8300

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/98)