

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A27643

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** SUNSET CENTRES OF SOUTH FLORIDA LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1629 K STREET, N.W.  
SUITE 1200  
WASHINGTON, DC 20006

**New Principal Place of Business:**

**Current Mailing Address:**

9816 S. MILITARY TRAIL  
SUITE C2-3  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

**FEI Number:** 52-1603314      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301      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

**GENERAL PARTNER INFORMATION:**

Document #: P20459  
Name: SPEYHAWK FLORIDA, INC.  
Address: 1629 K STREET, N.W., SUITE 1200  
City-St-Zip: WASHINGTON, DC 20006

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #: K50538  
Name: WPI FLORIDA, INC.  
Address: 1629 K STREET, N.W., SUITE 1200  
City-St-Zip: WASHINGTON, DC 20006

Address:  
City-St-Zip:

I hereby 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: F DAVIS CAMALIER

GP

04/14/2011

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

\_\_\_\_\_  
Date