

1ST NOTICE: DUE ON OR BEFORE DECEMBER 31, 1994

LIMITED PARTNERSHIP
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 MAR 10 AM 11:41
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. Name of Limited Partnership

1a. DOCUMENT #
A94000000310

SUNSHINE PORTFOLIO, LTD. I

Mailing Address

% BAITA INTERNATIONAL, INC.
8130 BAYMEADOWS WAY WEST, SUITE 302
JACKSONVILLE FL 32256

Principal Office Address

% BAITA INTERNATIONAL, INC.
8130 BAYMEADOWS WAY WEST, SUITE 302
JACKSONVILLE FL 32256

2. New Mailing Address, if Any

State, Apt. #, etc.

City, State & Zip

900001432509

2a. If a Principal Office, if Any, is Applicable

03/17/95-01031-011

***\$576.25 ***\$576.25

State, Apt. #, etc.

City, State & Zip

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a.

3. Date Registered to Do Business in FLORIDA

03/10/1994

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown on Record

\$7,500.00

5b. Amount of Capital Contributions in FLORIDA to date

\$ 7,109,924

6. FCI Number

59-3229437

Applied For

Not Applicable

7.

\$9.75 Additional Fee required for a Certificate of Status ☐

8. THE BASIC ANNUAL REPORT FILING FEE IS FIGURED AT THE RATE OF \$7.00 PER THOUSAND ON THE ACTUAL CAPITAL CONTRIBUTION PLUS A SUPPLEMENTAL FEE OF \$138.75 PURSUANT TO s.607.193, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75). For questions concerning filing fees, please call (804) 487-6056. Please submit your 1995 annual report with a check payable to the Secretary of State in U.S. funds through a U.S. bank.

9. Name and Address of Current Registered Agent

BAITA INTERNATIONAL, INC.
8130 BAYMEADOWS WAY WEST, SUITE 302
JACKSONVILLE FL 32256

10. If changed, new registered agent/office

Name

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

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620, 605.1 and 620.197, Florida Statutes, the above-named limited partnership, on behalf of 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 620.197, 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. Names of General Partner(s)

BAITA INTERNATIONAL, INC.

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

8130 BAYMEADOWS WAY W

11b.

City and State

JACKSONVILLE FL

11c. Registration Document Number

F94000000215

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 s. 607.193(1)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with section 119.07(3)(a) 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 effect 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

David L. Fey

DATE

03/20/94

Typed or Printed Name of General Partner Signing Form

David L. Fey, Sr. V.P. Baita International

Telephone Number

404-636-6778