

# 2012 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A96000000274

Entity Name: SFS PROVISION FUND, LTD.

FILED  
Jan 26, 2012  
Secretary of State

## Current Principal Place of Business:

1511 N. WESTSHORE BLVD.  
SUITE 300  
TAMPA, FL 33607

## New Principal Place of Business:

5300 W. CYPRESS STREET  
SUITE 200  
TAMPA, FL 33607

## Current Mailing Address:

1511 N. WESTSHORE BLVD.  
SUITE 300  
TAMPA, FL 33607

## New Mailing Address:

5300 W. CYPRESS STREET  
SUITE 200  
TAMPA, FL 33607

FEI Number: 59-3360922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASTER CONTROL, INC.  
1511 N. WESTSHORE BLVD.  
SUITE 300  
TAMPA, FL 33607 US

## Name and Address of New Registered Agent:

MASTER CONTROL, INC.  
5300 W. CYPRESS STREET  
SUITE 200  
TAMPA, FL 33607 US

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

01/26/2012

\_\_\_\_\_  
Date

## GENERAL PARTNER INFORMATION:

Document #: P97000017669  
Name: MASTER CONTROL, INC.  
Address: 1511 N. WESTSHORE BLVD., STE 300  
City-St-Zip: TAMPA, FL 33607

## ADDRESS CHANGES ONLY:

Address: 5300 W. CYPRESS ST., STE 200  
City-St-Zip: TAMPA, FL 33607

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: M. STEVEN SEMBLER

P

01/26/2012

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

\_\_\_\_\_  
Date