

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000001222

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA FOR PROFIT PARTNERS I, LTD.

**Current Principal Place of Business:**

3325 SOUTH UNIVERSITY DR.,  
SUITE 110  
DAVIE, FL 33328

**New Principal Place of Business:**

3325 SOUTH UNIVERSITY DR.,  
SUITE 110  
DAVIE, FL 33328 US

**Current Mailing Address:**

3325 SOUTH UNIVERSITY DR.,  
SUITE 110  
DAVIE, FL 33328

**New Mailing Address:**

3325 SOUTH UNIVERSITY DR.,  
SUITE 110  
DAVIE, FL 33328 US

**FEI Number:** 65-0836791

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WINOCUR, RICARDO  
3325 SOUTH UNIVERSITY DR.,  
SUITE 110  
DAVIE, FL 33328 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 #: V42920  
Name: TRIPLE NET, INC.  
Address: 3325 SO. UNIVERSITY DR., STE. #110  
City-St-Zip: DAVIE, FL 33328

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip: DAVIE, FL 33328 US

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: RICARDO WINOCUR

MGR

03/16/2012

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

\_\_\_\_\_  
Date