



**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A99000001249</b> 1. Entity Name <b>SUNCARE PROPERTIES, LTD.</b>					
Principal Place of Business <b>C/O SUNMARK</b> <b>800 WEST CYPRESS CREEK ROAD, SUITE 350</b> <b>FT. LAUDERDALE, FL 33309</b>			Mailing Address <b>C/O SUNMARK</b> <b>800 WEST CYPRESS CREEK ROAD, SUITE 350</b> <b>FT. LAUDERDALE, FL 33309</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		04072005    Chg-LP    CR2E003 (10/03)	
Zip    Country		Zip    Country		4. FEI Number <b>65-0936783</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>SUNMARK PROPERTIES II, INC.</b> <b>800 WEST CYPRESS CREEK ROAD, SUITE 350</b> <b>FT. LAUDERDALE, FL 33309</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$7,500.00</b>		10. Amount of Capital Contributions in FLORIDA to date. <b>\$7,500.00</b>			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # <b>P99000067508</b> NAME <b>SUNMARK PROPERTIES II, INC.</b> STREET ADDRESS <b>800 CYPRESS CREEK ROAD, SUITE 350</b> CITY-ST-ZIP <b>FT. LAUDERDALE, FL 33309</b>			STREET ADDRESS CITY-ST-ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<b>Jay Krinsky, 4/08/05 (954)202-7776</b> <small>Date    Daytime Phone #</small>		

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