

**2015 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A10000000028

**Entity Name:** SHUNYATA-KAI INTERNATIONAL FAMILY LIMITED  
PARTNERSHIP

**FILED**  
**Apr 22, 2015**  
**Secretary of State**  
**CC6452466965**

**Current Principal Place of Business:**

4719 E.TRAILS DR.  
SARASOTA, FL 34232

**Current Mailing Address:**

4719 E.TRAILS DR.  
SARASOTA, FL 34232 US

**FEI Number: 80-0572574**

**Certificate of Status Desired: No**

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

TEMPLETON, CODY  
4719 E.TRAILS DR.  
SARASOTA, FL 34232 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

\_\_\_\_\_  
Date

**General Partner Detail :**

Document #

Document #

Name            TEMPLETON, CODY

Name            STAPLETON, REGINA R

Address        4719 E.TRAILS DR.

Address        4719 E. TRAILS DR.

City-State-Zip: SARASOTA FL 34232

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*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: REGINA STAPLETON**

**GENERAL PARTNER**

**04/22/2015**

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

\_\_\_\_\_  
Date