2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A29451

1. Entity Name

MARKER INVESTMENT PROPERTIES, LTD.

FILED

00 MAR 27 PM 2:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
770 SOUTH ORANGE BLOSSOM TRAIL APOPKA FL 32703	~~770 SOUTH ORANGE BLOSSOM TRAIL~~ ~~APOPKA FL 32703-6558~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 775 Suite, Apt. #, etc.
City & State	City & State: Polk City FL
Zip / Country	Zip: 33868 / Country

4. FEI Number 59-2988828 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MARKER, ALVIN C ~~770 SOUTH ORANGE BLOSSOM TRAIL~~ ~~APOPKA FL 32703~~	Name Street Address (P.O. Box Number is Not Acceptable): 685 CR 559A Auburndale City: FL Zip Code: 33823

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.

SIGNATURE Alvin C. Marker
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$1,108,467.00		

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT # NAME: MARKER, ALVIN C STREET ADDRESS: P.O. BOX 775 N/A CITY-ST-ZIP: POLK CITY FL 33868	STREET ADDRESS CITY-ST-ZIP: 900000320301 9--0 -04/11/00--01043--015 ****526.25 ****526.25
DOCUMENT # NAME: MARKER BRUNO, DEBRA STREET ADDRESS: 5557 BLOOMFIELD BLVD. CITY-ST-ZIP: LAKELAND FL 33810	STREET ADDRESS CITY-ST-ZIP
DOCUMENT # NAME: MARKER DOBSON, JOYCE STREET ADDRESS: P.O. BOX 775 N/A CITY-ST-ZIP: POLK CITY FL 33860	STREET ADDRESS CITY-ST-ZIP
DOCUMENT # NAME: MARKER, VICTOR C STREET ADDRESS: 16803 TUSCANOOGA ROAD CITY-ST-ZIP: GROVELAND FL 32736	STREET ADDRESS CITY-ST-ZIP
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP
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CR2E003 (9/99)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE: SIGNATURE REQUIRED Ben Partner 3-23-00 9639841416
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #