

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVAL
AND
FILED

0014466
AT

DOCUMENT # **A29451**

1. Entity Name

MARKER INVESTMENT PROPERTIES, LTD.

02 APR 17 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

P.O. BOX 775
POLK CITY FL 33868

Mailing Address

P.O. BOX 775
POLK CITY FL 33868



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DUE BY MAY 1, 2002

Zip

Country

Zip

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
685 CR 559 A
AUBURNDALE FL 33823

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$1,108,467.00

10. Amount of Capital Contributions
in FLORIDA to date.

1,108,467.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

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	STREET ADDRESS	CITY-ST-ZIP
	MARKER, ALVIN C	P.O. BOX 775 N/A	POLK CITY FL 33868
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARKER BRUNO, DEBRA	5557 BLOOMFIELD BLVD.	LAKELAND FL 33810
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARKER DOBSON, JOYCE	P.O. BOX 775 N/A	POLK CITY FL 33860
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARKER, VICTOR C	16803 TUSCANOOGA ROAD	GROVELAND FL 32736
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
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CR2E003 (9/01)

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:

Alvin C. Marker, Gen. Ptr
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/15/02

863-984-1416

Date

Daytime Phone #