

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0014740 AT

DOCUMENT # A29451	
1. Entity Name MARKER INVESTMENT PROPERTIES, LTD.	

FILED

03 MAY -6 PM 1:30

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
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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DUE BY MAY 1, 2003	
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
MARKER, ALVIN C 685 CR 559 A AUBURNDAL FL 33823

7. Name and Address of New Registered Agent
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$1,108,467.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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	
	MARKER, ALVIN C		
STREET ADDRESS	P.O. BOX 775 N/A	CITY-ST-ZIP	
	POLK CITY FL 33868		
DOCUMENT #	NAME	STREET ADDRESS	
	MARKER BRUNO, DEBRA		315 White Cliff Blvd.
STREET ADDRESS	6557 BLOOMFIELD BLVD.	CITY-ST-ZIP	Auburndale, FL 33823
	LAKELAND FL 33810		
DOCUMENT #	NAME	STREET ADDRESS	
	MARKER DOBSON, JOYCE		157 Old Nichols Cir.
STREET ADDRESS	P.O. BOX 775 N/A	CITY-ST-ZIP	Auburndale, FL 33823
	POLK CITY FL 33868		
DOCUMENT #	NAME	STREET ADDRESS	
	MARKER, VICTOR C		
STREET ADDRESS	16803 TUSCANOOGA ROAD	CITY-ST-ZIP	
	GROVELAND FL 32736		
DOCUMENT #	NAME	STREET ADDRESS	
			100018305781
STREET ADDRESS		CITY-ST-ZIP	05/06/03--01093--031 **526.25
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	

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: *Debra Marker Bruno, gen. ptr* **11/06/03** **863**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone # **967-2105**

CR2E003 (10/02)

STAPLE CHECK HERE