

2001 UNIFORM BUSINESS REPORT (UBR)

0018345 AB

DOCUMENT # B93000000322

1. Entity Name
SUN NLF LIMITED PARTNERSHIP

FILED

00 FEB 22 PM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business: C/O PRENTICE-HALL CORPORATION SYSTEM, INC. 32 LOOCKERMAN SQUARE, SUITE L-100 DOVER DE 19901
Mailing Address: 2525 EAST CAMELBACK, SUITE 888 PHOENIX AZ 85016

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.

City & State
4. FEI Number **51-0349810** Applied For Not Applicable

Zip Country Zip Country
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. Capital Contributions as Shown on record. **\$13,200,000.00**
10. Amount of Capital Contributions in FLORIDA to date.
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 # **G00312900300** Joint Venture
NAME **SUN PARTERS, A CALIFORNIA GEN. PARTNERSHIP**
STREET ADDRESS **2280 DOUGLAS BLVD., SUITE 240**
CITY-ST-ZIP **ROSEVILLE CA 95661**

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)(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: Stephen E. Kennekar **Stephen E. Kennekar, V.P. of Gen. Partner** **2/7/01** **602-852-5588**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)