

2001 UNIFORM BUSINESS REPORT (UBR)

00023898 AF

DOCUMENT # A00000000531
1. Entity Name
 T.F.P. INVESTMENTS, LTD.

FILED

yg

Principal Place of Business 437 GASTON FOSTER ROAD ORLANDO FL 32807
Mailing Address 437 GASTON FOSTER ROAD ORLANDO FL 32807

01 APR -4 AM 10:46
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



2. Principal Place of Business 6658 FRANCONIA DRIVE
3. Mailing Address 6658 FRANCONIA DRIVE

DO NOT WRITE IN THIS SPACE

City & State BELLE ISLE, FL
Zip 32812 **Country** USA

4. FEI Number Applied For
 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 THORNTON, MARK B
 437 GASTON FOSTER ROAD
 ORLANDO FL 32807

7. Name and Address of New Registered Agent
 Name: SAME
 Street Address (P.O. Box Number is Not Acceptable): 6658 FRANCONIA DRIVE
 City: BELLE ISLE FL Zip Code: 32812

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: THORNTON, MARK B *Mark B Thornton* 01-08-01
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. \$2,000,000.00
10. Amount of Capital Contributions in FLORIDA to date. 3,000,000.00
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	
DOCUMENT #	P00000030405
NAME	T.F. MANAGEMENT, INC.
STREET ADDRESS	437 GASTON FOSTER ROAD
CITY-ST-ZIP	ORLANDO FL 32807
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	6658 FRANCONIA DRIVE
CITY-ST-ZIP	BELLE ISLE, FL 32812
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	600003996046--7
CITY-ST-ZIP	-04/13/01--01012--022 ***526.25 ***526.25
STREET ADDRESS	
CITY-ST-ZIP	
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: *Mark B Thornton* T.F. MANAGEMENT INC. THORNTON, MARK B 01-08-01 407-854-4765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (11/00)