2002	2 UNIFORM BUSI	NESS REPO	RT (UB	3)			
DOCUMENTS#AOLOOOOOT60				FILED			
Ter	npus Resorts 201	01-A,Ltd.		02 MAY -3 AM 10:	02 MAY -3 AM 10: 05		
Principal Place of Business 7380 SAND LAKE ROAD. SUITE 600 ORLANDO FL 32819		Mailing Address 7380 SAND LAKE ROAD. SUITE 600 ORLANDO FL 32819		SECRETARY OF ST. TALLAHASSEE. FLO			
. Disciple		Le Malland Address	·				
2. Principal Place of Business Please change		3. Mailing Address Please change					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DUE BY MAY 1, 200			
City & Stat		City & State	ove	4. FEI Number 59-3723910	Applied For Not Applicable		
Zip	Country	Žip	Country	5 Certificate of Status Desired \$	8.75 Additional		
	6. Name and Address of Current F	legistered Agent	Name	7. Name and Address of New Registered Ag			
	©. RANGE AVE., SUITE 2300 O FL 32819		Street /	ddress (P.O. Box Number is Not Acceptable)	Zip Code .		
SIGNATURE 9. Capital Co as Shown	Signature, typed or printed name of registered agent an ntributions \$44,700,000,00	•	al Contributions	DATE 11 MAKE CHECK PAYABLEST SEE REVERSE SIDE FOR			
	A GENERAL PARTNER TH	IAT IS A BUSINESS EN	ITITY MUST BE	REGISTERED AND ACTIVE WITH THIS OFFICE.	A		
12.	GENERAL PARTNER		13.	ADDRESS CHANGES ONLY			
DOCUMENT # NAME STREET ADDRESS	L01000008637 TEMPUS FUNDING I, LLC 7380 SAND LAKE ROAD, SUITE 6	600	STREET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32819		CITY-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	<u>4000055730</u> -05/22/02010 ****535.00 **	94⊓ 06009 ***535.00		
DOCUMENT / _ NAME STREET ADDRESS CITY-ST-ZIP	-		STREET ADDRESS CITY-ST-ZIP		ė.		
DOCUMENT #	. .		STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZiP	· · · · · · · · · · · · · · · · · · ·			
DOCUMENT # NAME			STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP				
DOCUMENT / NAME			STREET ADDRESS				

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 expowered to execute this report as required by Chapter 620, Florida Statutes

Require Forwall, President of Tempus Mkta

407
SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME by SIGNING GENERAL PARTNER

CITY-ST-ZIP

CITY-ST-ZIP

2002 UNIFO	RM BUSINESS	REPORT (L	JBR)
OCUMENT #	A01000007	' 59	

DOOL	PARTY ANIO	00000750		·	\neg	r.		
DOCUMENT # A0100000759 1. Entity Name TEMPUS FUNDING I, LTD.						FILED 02 HAY -3 AM 10: 05		
Principal Place of Business Mailing Address 7380 SAND LAKE ROAD. SUITE 600 7380 SAND LAKE ROAD. ORLANDO FL 32819 ORLANDO FL 32819			SUITE 600			SECRETARY OF TALLAHASSEE, F	STATE LORIDA	
							i i i i i i i i i i i i i i i i i i i	
Principal Place of Business Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.		, <u>,</u>		DUE BY MAY 1, 2002				
City & Stat	е	City & State	State		4. FEI Numbe	3723808	Applied For Not Applicable	
Zip	Country	Zíp	Country			of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent			7. Name and	Address of New Register		
400 B	2.60			Name			· · · · · ·	
	RANGE AVE., SUITE 2300			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
ORLAND	O FL 32819							
				City FL Zip Code				
SIGNATURE _ 9. Capital Cor as Shown o	on record.	10. Amount of Capita in FLORIDA to da				SEE REVERSE SIDE	BLE TO DEPT. OF STATE FOR FEE INFORMATION	
	A GENERAL PARTNER NOTE: General Partners N	THAT IS A BUSINESS EN	TITY M	UST BE REGI	STERED AND A	CTIVE WITH THIS OFF	ICE.	
12.	GENERAL PARTN	ER INFORMATION	13.	,		ADDRESS CHANGES	<u> </u>	
OOCUMENT # IAME	L01000008637 TEMPUS FUNDING I, LLC		STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	7380 SAND LAKE ROAD, SUIT ORLANDO FL 32819	E 600	CITY	-ST-ZIP	:90	 10005578	80994	
DOCUMENT # NAME			STRE	ET ADDRESS		10005578 -05/22/02 *****535.00	01006010 ****535.00	
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STREET ADDRESS			CITY-	-ST-ZIP		a		
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OCUMENT # F IAME TREET ADDRESS	•		STRE	ET ADDRESS			 .	
ITY-ST-ZIP			CITY-	-ST-ZIP				
IAME TREET ADDRESS			STREE	ET ADDRESS		· · · · · ·		
CITY-ST-ZIP				ST-ZIP				
indicated (ertify that the information supplied wit on this report is true and accurate an er or trustee empowered to execute the	d that my signature shall have th	ne same	legal effect as if	ection 119.07(3)(i) made under oath;	Florida Statutes. I further of that I am a General Partner	pertify that the information of the limited partnership or	