

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

**FILED**  
**Apr 28, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # A01000000759**

1. Entity Name  
**TEMPUS FUNDING I, LTD.**



Principal Place of Business  
**7380 SAND LAKE ROAD, SUITE 600**  
**ORLANDO, FL 32819**

Mailing Address  
**7380 SAND LAKE ROAD, SUITE 600**  
**ORLANDO, FL 32819**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country

City & State  
 Zip Country



04122004 Chg-LP CR2E003 (10/03)

4. FEI Number  
**59-3723808**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**A.G.C. CO.**  
**200 S. ORANGE AVE., SUITE 2300**  
**ORLANDO, FL 32819**

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. **\$46,301,762.00**

10. Amount of Capital Contributions in FLORIDA to date. **45,388,174**

**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 # **L01000008637**  
 NAME **TEMPUS FUNDING I, LLC**  
 STREET ADDRESS **7380 SAND LAKE ROAD, SUITE 600**  
 CITY-ST-ZIP **ORLANDO, FL 32819**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS  
 CITY-ST-ZIP

**000000157775**  
**05/06/04-80042-002 535.00**

STREET ADDRESS  
 CITY-ST-ZIP

**000000158552**  
**05/06/05-80091-002 535.00**

STREET ADDRESS  
 CITY-ST-ZIP

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 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:** *[Signature]* **Andrew Marcus, VP of**  
**Tempus Mktg Int'l Inc, GP of**  
**TPI, Ltd, mgr of Gen** **4/14/04** **407-226-1000**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **Plr** Date Daytime Phone #

STAPLE CHECK HERE