


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

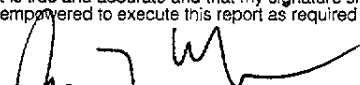
FILED
May 05, 2005 08:00 AM
Secretary of State

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			City & State		
Zip		Country		4. FEI Number 59-3723808	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$46,301,762.00			10. Amount of Capital Contributions in FLORIDA to date. 43,639,419.00		
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 #	L01000008637		STREET ADDRESS		
NAME	TEMPUS FUNDING I, LLC		CITY-ST-ZIP		
STREET ADDRESS	7380 SAND LAKE ROAD, SUITE 600		CITY-ST-ZIP		
CITY-ST-ZIP	ORLANDO, FL 32819		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
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 05/05/05-80129-016 535.00

STAPLE CHECK HERE

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:  **Andrew Marcus, VP of**
 Tempus Mktg Int'l Inc, GP of
 member of Gen Ptr. **4/18/05** **407-226-1000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #