

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Mar 02, 2001 08:00 AM****Secretary of State****DOCUMENT # A12558**1. Entity Name  
**SUNTREE INVESTORS, LTD.****Principal Place of Business****Mailing Address**

122 S.W. 11TH COURT

P.O. BOX 4920

BOCA RATON  
33486

FL

ORLANDO  
328024920

FL

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number****59-2229326**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent**TOMFORDE ERNESTT  
122 E. COLONIAL DRIVE  
SUITE 202  
ORLANDO  
32801

US

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**03/02/2001**

DATE

**9. Capital Contributions**

as Shown on record. 1,011,600.00

**10. Amount of Capital Contributions**

in FLORIDA to date. 1,011,600.00

**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****13. ADDRESS CHANGES ONLY**DOCUMENT #  
NAME BOURNE ROBERT A  
STREET ADDRESS 450 S. ORANGE AVENUE  
CITY-ST-ZIP ORLANDO FL 32801STREET ADDRESS  
CITY-ST-ZIPDOCUMENT #  
NAME SENEFF JAMES MJR.  
STREET ADDRESS 450 S. ORANGE AVENUE  
CITY-ST-ZIP ORLANDO FL 32801STREET ADDRESS  
CITY-ST-ZIPDOCUMENT #  
NAME TOMFORDE ERNEST  
STREET ADDRESS 122 S.W. 11 COURT  
CITY-ST-ZIP BOCA RATON FL 33486STREET ADDRESS  
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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:****ROBERT A. BOURNE**

GP

03/02/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (11/00)