DOCUMENT # A9400001635 1. Entity Name SOUTHEASTERN FUNDING PARTNERS, LLLP						FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA		
	ce of Business IST STREET. SUITE D E FL 32606	Mailing Address 2831 N.W. 41ST STREET GAINESVILLE FL 32606	2831 N.W. 41ST STREET. SUITE D		1 (18)	APR -3	BAFRI INDER GEIRG INST BUIL ING	
Principal Place of Business 3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DUE BY MAY 1, 20	02	7
City & State		City & State	City & State		4. FEI Number	59-3279641	Applied For Not Applicable	
Zip Country		Zip	Zip Coun		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent	`	Nama * · ·	7. Name and A	ddress of New Registered /	lgent	
THOMPSON, C. FREDERICK				Name *				
2831 N.W. 41ST STREET, SUITE D				Street Addres	s (P.O. Box Number	is Not Acceptable)		
GAINESV	ILLE FL 32606							
				City		FL	Zip Code	_
SIGNATURE ,	named entity submits this statement for stat		register	ed office or regis	tered agent, or both	DATE		
9. Capital Contributions as Shown on record. \$2,063,655.00 In FLORIDA to date			ate.		11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION ST BE REGISTERED AND ACTIVE WITH THIS OFFICE.		R FEE INFORMATION	
	A GENERAL PARTNER NOTE: General Partners MA	THAT IS A BUSINESS EN AY NOT be changed on t	he form	IUST BE REGI n; an amendm	STERED AND AC ent must be filed	CTIVE WITH THIS OFFICE to change a general par	ž. tner.	
12. GENERAL PARTNER INFORMATION			13.	· · · · · · · · · · · · · · · · · · ·	ADDRESS CHANGES ONLY			Ξ_
DOCUMENT # NAME	THOMPSON PROPERTY MANAGEMENT CORPORATION —— 2831 N.W. 41ST STREET, SUITE D			EET ADDRESS				CR2E003 (9/01)
STREET ADDRESS CITY-ST-ZIP				ST-ZIP 7000051942772 -04/05/0201018001				E00
DOCUMENT # NAME	THOMPSON GROUP, INC. 2831 NW 41st Street, Suite D Gainesville, FL 32606 The surviving corporation by means of			EET ADDRESS		****526.25 ****526.25		
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP			Alb I	
DOCUMENT # _ NAME	merger filed November 5, Florida Department of Sta	2001, with the	STRE	ET ADDRESS		-	-	
STREET AODRESS I			CITY	-ST-ZIP				
DOCUMENT # NAME			STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY	- ST- ZIP				
DOCUMENT # NAME			STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			CITY-	-ST-ZIP	5/10 ·			7
DOCUMENT # NAME			STRE	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP				
indicated	certify that the information supplied with on this report is true and accurate and error trustee employeed to execute this	this filing does not qualify for that my signature shall have it	the exer	mption stated in S legal effect as if	Section 119.07(3)(i), made under oath; tl	Florida Statutes. I further certi nat I am a General Partner of t	fy that the information he limited partnership o	r

SIGNATURE: ____

STAPLE CHECK, HERE

President of Thompson Group, Inc., General Partner 3/29/02

352-378-4814 Daytime Phone #