

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A94000001635**

1. Entity Name  
**SOUTHEASTERN FUNDING PARTNERS, LLP**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 JUN 24 AM 8:15

Principal Place of Business  
**2831 N.W. 41ST STREET, SUITE D  
GAINESVILLE FL 32606**

Mailing Address  
**2831 N.W. 41ST STREET, SUITE D  
GAINESVILLE FL 32606**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**DUE BY MAY 1, 2003**

City & State

City & State

4. FEI Number **59-3279641**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THOMPSON, C. FREDERICK  
2831 N.W. 41ST STREET, SUITE D  
GAINESVILLE FL 32606**

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

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

DATE

9. Capital Contributions as Shown on record. **\$2,063,655.00**

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO FL. 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 # **J01321**  
NAME **THOMPSON GROUP, INC.**  
STREET ADDRESS **2831 N.W. 41ST STREET, SUITE D**  
CITY-ST-ZIP **GAINESVILLE FL 32606**

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

**600019085936**  
**05/15/03--01060--006 \*\*437.50**

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**600019085936**  
**07/09/03--01046--004 \*\*400.75**

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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 REQUIRED**

**04/07/03**

**352-378-4814**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
**C. Frederick Thompson, President - Thompson Group, Inc.**

Date

Daytime Phone #

CR2E003 (10/02)

0007374 AT

STAPLE CHECK HERE