FILED

03 APR 10 AM 10: 02

TALLAHASSEE, FLORIDA

2003 LIMITED PARTNERSHIP

UNIFORM	BUSINESS REPO	RT (UBR
DOCUMENT #	A97000001514	

1. Entity Name

Principal Place of Business 7338 ESTRELLA COURT

BOCA RATON FL 33433

STREET ADDRESS

CITY-ST-ZIP

SUWANEE SUN PROPERTIES, LTD.



Mailing Address 7338 ESTRELLA COURT

BOCA RATON FL 33433

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 65-07665	75	Applied For Not Applicable				
Zip		Country	Zip	Coun	try	5. Certificate of Status Desir	ed 🙀	\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
TANENBAUM, WILLIAM				Name ,						
7338 ESTRELLA COURT				Street Address (P.O. Box Number is Not Acceptable)						
BOCA RATON FL 33433										
					City		F			
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.				Conital Contrib	ti	44 88872 0	DATE	E TO FL. DEPT. OF STATE		
9. Capital Contributions as Shown on record. \$545, 107-42 in FLORIDA to date.			A to date.		SEE RE	ERSE SIDE F	OR 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		13.	,	ADDRESS CHANGES ONLY				
DOCUMENT #		,						****		
NAME	TANENBAL	TANENBAUM, WILLIAM 7338 ESTRELLA COURT BOCA RATON FL 33433		SIRE	ET ADDRESS					
STREET ADDRESS CITY-ST-ZIP				CITY-	-ST-ZiP			527		
DOCUMENT # NAME				STRE	ET ADDRESS	700015651527 04/10/0301083008 **535.00				
STREET ADDRESS CITY-ST-ZIP				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						
DOCUMENT # NAME				STREI	ET ADDRESS					
STREET ADDRESS : CITY-ST-ZIP				CITY-	ST-ZIP	-				
DOCUMENT # NAME				STREE	ET ADDRESS					

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

CITY-ST-ZIP