## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DO NOT WRITE IN THIS SPACE

**FILED** May 02, 2006 08:00 AM Secretary of State

DOCUMENT # A97  1. Entity Name TEMPUS RESORTS INTER		
Principal Place of Business	Mailino Artdress	

7380 SAND LAKE RD., STE 600 ORLANDO, FL 32819

7380 SAND LAKE RD., STE 600 ORLANDO, FL 32819



04202008 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-3482443

Applied Far Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY

1201 HAYS STREET TALLAHASSEE, FL 32301-2525			IN THIS SPACE	
	the obligat	named entity submits this statement for the purpose of changing its regions of registered agent.	istered office or registered agent, or both.	in the State of Florida I am (amiliar with, and accept
Ì	SIGNATURE	Signature, typed or printed name of registered agent and title if applicable		GATE
		FILE NOWIN FEE IS \$500.00 After May 1, 2006, Fee will be \$900.0		
		A GENERAL PARTNER THAT IS A BUSINESS ENTIT NOTE: General Partners MAY NOT be changed on the	Y MUST BE REGISTERED AND AC form; an amendment must be filed	TIVE WITH THIS OFFICE. to change a general partner.
į	12.	GENERAL PARTNER INFORMATION		
١	DOCUMENT #	M9900000562 –		
į	NAME	AP/TEMPUS, LLC		
ĺ	STREET ADDRESS	7380 SAND LAKE RD., STE 600		
ļ	C17Y-ST-ZP	ORLANDO, FL 32819		
۱	BOCUMENT #			
ì	NAME	}		<u> </u>
	STREET ADDRESS CITY-ST-ZIP	<b>‡</b>	į	05/18/06-80001-016 508.75 T
ŀ		······································		
	DOCUMENT !	<b>1</b>		
	NAME	- [	00.11	AT 14/BITE
	STREET AUDRESS	· · · · · · · · · · · · · · · · · · ·	א טט	OT WRITE
L	CSTY-ST-ZIP		(8.1 701)	IC CDACE
	DOCUMENT	1		IIS SPACE
	NAME	j		
	STREET ADDRESS	1		
	CITY-ST-ZIP			
	DOCUMENT #	<b>i</b>		
	NAME	1		
	STREET ADDRESS	ì		
_	CITY-ST-ZIP			
	OCCUMENT /	4		
	NAME	ž.		
	SCHEET ADDRESS	<b>.</b>		
	Orner Ci mer [			

14. I hereby certify that the information supplied with this lifting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and argurate 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:

STAPLE CHECK HERE

RE AND TYPEO OR PRINTED NAME OF SIGNING GENERAL PARTNER

Roger Farwell, President of Gen

4/21/06

407-226-1000

Daytime Phone #