

# 2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A99000000679

1. Entity Name  
SUNCOR OF LAKE MARY, LTD.



FILED

03 JAN 14 PM 2:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
160 INTERNATIONAL PARKWAY, SUITE 276  
HEATHROW FL 32746

Mailing Address  
160 INTERNATIONAL PARKWAY, SUITE 276  
HEATHROW FL 32746



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite 250

City & State

Suite, Apt. #, etc.

Suite 250

City & State

DUE BY MAY 1, 2003

4. FEI Number 59-3571815

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

HORIAN, ROBERT L  
160 INTERNATIONAL PARKWAY, SUITE 276  
HEATHROW FL 32746

Name

Street Address (P.O. Box Number is Not Acceptable)

160 International Parkway, Suite 250

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.

\$792,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

0

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 # P97000077053  
NAME SUNCOR INVESTMENTS, INC.  
STREET ADDRESS 160 INTERNATIONAL PARKWAY, SUITE 276  
CITY-ST-ZIP HEATHROW FL 32746

STREET ADDRESS

160 International Parkway, Suite 250

CITY-ST-ZIP

Heathrow, FL 32746

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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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/8/03 407829-3400

Date

Daytime Phone #

CR2E003 (10/02)

0007863 AT