

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # B02000000156

1. Entity Name
 USRP FUNDING 2002-A, L.P.



FILED

2004 SEP 10 P 3:44



07132004 Chg-LP CR2E003 (10/03)

4. FEI Number
 01-0664226

Applied For
 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

7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. \$3,749,188.60

10. Amount of Capital Contributions in FLORIDA to date. 3,065,191.07

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 # M02000001211
 NAME USRP (SFGP) 2, LLC
 STREET ADDRESS 12240 INWOOD ROAD, SUITE 300
 CITY-ST-ZIP DALLAS, TX 75244

STREET ADDRESS
 CITY-ST-ZIP 200041536212

DOCUMENT #
 NAME
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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

By: USRP (SFGP) 2, LLC
 SIGNATURE: Valerie S. Siverling

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Valerie S. Siverling
 Manager

9-8-04 972 387-1487

Date Daytime Phone #

STAPLE CHECK HERE