

2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

0018395 AB

DOCUMENT # B97000000432



FILED
03 MAY -6 PM 8:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. Entity Name SUN COMMUNITIES FUNDING LIMITED PARTNERSHIP	
Principal Place of Business 31700 MIDDLEBELT ROAD, SUITE 145 FARMINGTON HILLS MI 48334	Mailing Address 31700 MIDDLEBELT ROAD, SUITE 145 FARMINGTON HILLS MI 48334



2. Principal Place of Business 27777 FRANKLIN RD	3. Mailing Address 27777 FRANKLIN RD
Suite, Apt. #, etc. STE. 200	Suite, Apt. #, etc. STE. 200

DUE BY MAY 1, 2003

City & State SOUTHFIELD, MI	City & State SOUTHFIELD, MI	4. FEI Number 38-3367176	Applied For <input type="checkbox"/> Not Applicable
Zip 48034	Country	Zip 48034	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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. **\$100.00**

10. Amount of Capital Contributions in FLORIDA to date. **100**

**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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	M97000000525 SUN COMMUNITIES FUNDING GP L.L.C. 31700 MIDDLEBELT ROAD, SUITE 145 FARMINGTON HILLS MI 48334
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY-ST-ZIP	27777 FRANKLIN RD STE. 200 SOUTHFIELD, MI 48034
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	200018311122 05/06/03 01125 007 **1125
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	
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: Jeffrey P. Jorissen **SIGNATURE REQUIRED** JEFFREY P. JORISSEN 5/1/03 248-208-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (10/02)

SAMPLE CHECK HERE