

2001 UNIFORM BUSINESS REPORT (UBR)

0017838 AF

DOCUMENT # A13533

1. Entity Name

MARTIN COLONY LIMITED PARTNERSHIP

FILED

01 FEB -2 AM 10:32

Principal Place of Business

**51 COLONY RD.
JUPITER FL 33469
US**

Mailing Address

**1101 LANGLEY LANE
MC LEAN VA 22101**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

51 COLONY ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

JUPITER

City & State

City & State

FLORIDA

4. FEI Number

54-1215648

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

33469

U.S.A.

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

**ZARETSKY, RICHARD P
1655 PALM BEACH LAKES BLVD.
SUITE 900
W. PALM BEACH FL 33401**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions as Shown on record.

\$2,000.00

10. Amount of Capital Contributions in FLORIDA to date.

11. MAKE CHECK PAYABLE TO 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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	MARTIN, VANA E	1101 LANGLEY LANE	MCLEAN VA

STREET ADDRESS	CITY-ST-ZIP
51 COLONY ROAD	JUPITER, FLA. 33469
400003655104--8	-02/06/01--01114--013
	****141.25 ****141.25

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 REQUIRED~~ **G.P.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
VANA E. MARTIN

1/30/01 **561-744-0303**
Date Daytime Phone #

CR2E003 (11/00)