

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

000740 AT

DOCUMENT # **A01000001537**

1. Entity Name

FCLC PARTNERS 21, LTD.

02 APR -3 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 300 INTERNATIONAL PARKWAY, SUITE 130 HEATHROW FL 32746	Mailing Address 300 INTERNATIONAL PARKWAY, SUITE 130 HEATHROW FL 32746
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

DUE BY MAY 1, 2002

4. FEI Number 01-0583460	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHRISTY, KATHERINE A
300 INTERNATIONAL PARKWAY, SUITE 130
HEATHROW FL 32746

7. Name and Address of New Registered Agent

Name
Selby, C. Thomas

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

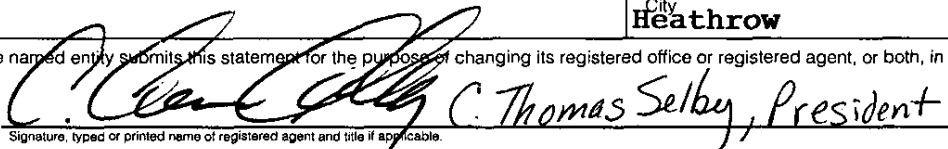
Suite 130

City
Heathrow

State
FL

Zip Code
32746

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  **C. Thomas Selby, President** DATE **3-21-02**

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.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	P01000110623
NAME	FCLC 21, INC.
STREET ADDRESS	300 INTERNATIONAL PARKWAY, SUITE 130
CITY-ST-ZIP	HEATHROW FL 32746
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700005235137--9
CITY-ST-ZIP	-04/10/02--01036--018
STREET ADDRESS	****141.25 ****141.25
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:  **C. Thomas Selby** DATE **3-21-02** Daytime Phone # **407-333-1604**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

CP2E003 (9/01)

STAPLE CHECK HERE