2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A02000001301

1. Entity Name
L. COLEN, LTD.

FILED
03 MAR -5 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
C/O ON TOP OF THE WORLD, INC.	C/O ON TOP OF THE WORLD, INC.
2291 WORLD PARKWAY BOULEVARD WEST	2291 WORLD PARKWAY BOULEVARD WEST
CLEARWATER FL 33763	CLEARWATER FL 33763

2. Principal Place of Business	3. Mailing Address
	8447 SW 99th Street Rd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Ocala FL
Zip / Country	Zip: 34481 / Country: USA

DUE BY MAY 1, 2003

4. FEI Number 71-0911388 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLEN, SIDNEY
~~C/O ON TOP OF THE WORLD, INC.~~
2291 WORLD PARKWAY BOULEVARD WEST
CLEARWATER FL 33763

7. Name and Address of New Registered Agent

Name: Colen, Gerald R. Esq.
Street Address (P.O. Box Number is Not Acceptable): C/O Devito & Colen
7243 Bryan Dairy Road
City: Largo FL Zip Code: 33777

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] 1/20/03
Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions as Shown on record.	$1,500,000.00	10. Amount of Capital Contributions in FLORIDA to date.	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 #	P02000104646	STREET ADDRESS	
NAME	COLEN CLEARWATER CORP., INC.		
STREET ADDRESS	C/O 2291 WORLD PARKWAY BOULEVARD WEST	CITY-ST-ZIP	400012461114 03/05/03--01060--009 **88.75
CITY-ST-ZIP	CLEARWATER FL 33763		
DOCUMENT #		STREET ADDRESS	400012461114
NAME			
STREET ADDRESS		CITY-ST-ZIP	02/13/03--01045--023 **437.50
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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] 1/28/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

STAPLE CHECK HERE

CR2E003 (10/02)