2002 UNIFORM BUSINESS REPORT (UBR)

A98000002425 DOCUMENT # FILED SECRETARY OF STATE VISION OF CORPORATIONS 1. Entity Name 101 NORTH CLEMATIS EQUITY INVESTORS, LTD. 02 APR -5 PM 2: 23 Principal Place of Business Mailing Address **GARDENS CORPORATE CENTER** GARDENS CORPORATE CENTER 3801 PGA BOULEVARD, SUITE 555 3801 PGA BOULEVARD, SUITE 555 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 3801 PGA Boulevard 3801 PGA Boulevard Suite 600 DUE BY MAY 1, 2002 Suite 600 Palm Beach Gardens, FL 33410 4. FEI Number Palm Beach Gardens, FL 33410 Applied For 65-0872824 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **REGSERV CORP** REGSERV CORP. **GARDENS CORPORATE CENTER** 3801 PGA Boulevard 3801 PGA BOULEVARD, SUITE 555 Suite 600 PALM BEACH GARDENS FL 33410 Palm Beach Gardens, FL 33410 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. 9. Capital Contributions \$1,856,250.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT, OF STATE as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION \$1,856,250.00 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 ADDRESS CHANGES ONLY P98000090460 DOCUMENT # STREET ADDRESS 101 NORTH CLEMATIS EQUITY CORPORATION NAME 3801 PGA BOULEVARD, SUITE 競易 600 STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS FL 33410 CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>600005234906--9</u> DOCUMENT A <u>-04/10/02--01031--002</u> ****526,25 STREET ADDRESS ****⁵26.25 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIF DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP. CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME ___ STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 AND TYPED ON PRINTED NAME OF SIGNING GENERAL PARTNER

Patrick J. DiSalvo Vice President

561-630-5055