

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 FEB 12 AM 9:18

1. Name of Limited Partnership
**1a. DOCUMENT #
A98000002426**

101 NORTH CLEMATIS INVESTORS, LTD.



Mailing Address 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401		Principal Office Address 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401		3. Date Formed or Registered 10/23/1998	5a. Capital Contributions as Shown on record \$1,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. State or Country of Formation FL	6. FEI Number 65-0890266	
City & State		City & State		7. Certificate of Status Desired <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	8. Make check payable to Dept. of State (See reverse side for fee information) \$8.75 Additional Fee Required
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent REGSERV CORP. 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401		10. If changed, new Registered Agent/Office	
		Name	
		Street Address (P.O. Box Number Is Not Applicable) 4000002781174-0	
		Suite, Apt. #, etc. 02/19/99-01031-021	
		City ****141.25 ****141.25	
		FL Zip Code	

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s) 101 NORTH CLEMATIS EQUITY IN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 222 LAKEVIEW AVENUE,	11b. City, State & Zip Code WEST PALM BEACH FL 33	11c. Registration/ Document Number A98000002425
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62-18-99

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE **FEBRUARY 9, 1999**

Typed or Printed Name of General Partner Signing Form

PATRICK J. DISALVO, VICE PRESIDENT

Telephone Number **(561) 655-9008**

CR2E003 (12/98)