

2001 UNIFORM BUSINESS REPORT (UBR)

0000036 AF

DOCUMENT # A98000002426

1. Entity Name
101 NORTH CLEMATIS INVESTORS, LTD.

Principal Place of Business
**222 LAKEVIEW AVENUE, 17TH FLOOR
WEST PALM BEACH FL 33401**

Mailing Address
**222 LAKEVIEW AVENUE, 17TH FLOOR
WEST PALM BEACH FL 33401**

2. Principal Place of Business
**Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

3. Mailing Address
**Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**


4. FEI Number **65-0890266** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

FILED

01 MAR 12 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**REGSERV CORP.
222 LAKEVIEW AVENUE, 17TH FLOOR
WEST PALM BEACH FL 33401**

7. Name and Address of New Registered Agent
**REGSERV CORP.
Gardens Corporate Center
3801 PGA Boulevard, Suite 555
Palm Beach Gardens, FL 33410**

FL Zip Code

8. registered office or registered agent, or both, in the State of Florida.

SIC By: Lawrence B. Juran, President DATE 1/23/01

9. Capital Contributions as Shown on record. 937,500 10. Amount of Capital Contributions in FLORIDA to date. \$ 937,500.00

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	A98000002425 101 NORTH CLEMATIS EQUITY INVESTORS, LTD. 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401	STREET ADDRESS CITY-ST-ZIP	Gardens Corporate Center 3801 PGA Boulevard, Suite 555 Palm Beach Gardens, FL 33410
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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: Patrick J. DiSalvo **SIGNATURE REQUIRED** 2/23/01 (561)630-5055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **Vice President** Date Daytime Phone #

CR2E003 (11/00)