## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A9900001773  1. Entity Name					FILED SECRETARY OF STATE DIVISION OF CORPORATIONS			
CC3 INVESTORS, LTD.					DIVISION	OF CORPORA	in	
Principal Place of Business Mailing Address					OI FEB 16 PM 1: 16			
222 LAKEVIEW AVENUE. 17TH FLOOR 222 LAKEVIEW AVENUE. 17TH WEST PALM BEACH FL 33401 WEST PALM BEACH FL 3340								•
				,				
2. Principal Place of Business 3. Mailing Address				# 10010H 1040 10110 10114 00111 00111 00111 00111 00111 10111 10011 10011 10011 10011				
Gardens Corporate Center Gardens Corporate Cen			ter	,	DO NOT WRITE IN THIS SPACE			MJH
3801 PGA Boulevard, Suite 555 3		3801 PGA Boulevard, Suite 555 Palm Beach Gardens, FL 33410		-	4. FEI Number	5-0960420		Applied For Not Applicable
(			<i>L</i> 33410	<del></del>	5. Certificate of Star	tus Desired	\$8.75 Fee Req	Additional
	6. Name and Address of Current F	egistered Agent			7. Name and Addre	ess of New Registe		
REGSERV CORP. 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401			Garde 3801	ns Corp PGA Bo	ERV CORP. as Corporate Center GA Boulevard, Suite 555 Beach Gardens, FL 33410  FL Zip Code			
8. TI REGSERV CORP.  3gistered office or registered agent, or both, in the State of Florida.  SIGN By:  Lawrence B. Juran, President  9. Capital Contributions as Shown on record.  10. Amount of Capital Contributions in FLORIDA to date.  11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION.								
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTI NOTE: General Partners MAY NOT be changed on the form; an amendment					t must be filed to d	hange a general	partner.	
12. DOCUMENT # NAME STREET ADDRESS	GENERAL PARTNER INFORMATION P99000095487 CC3 EQUITY CORPORATION 222 LAKEVIEW AVENUE, 17TH FLOOR WEST PALM BEACH FL 33401		STREET ADDRESS CITY-ST-ZIP	Gard	ens Corporate Center PGA Boulevard, Suite 555 Beach Gardens, FL 33410			
CITY-ST-ZIP DOCUMENT #				Palm				
NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	ļ	<u> </u>			
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DOCUMENT #			STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP					
indicated	pertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute this	hat my signature shall have the :	same legal ett	ecrasirn	ection 119.07(3)(i), Floi nade under oath; that l	rida Statutes. I furthe I am a General Partr	er certify that t ner of the limit	he information ed partnership or

IREO Patrick J. DiSalvo

**SIGNATURE:** 

(561)630-5055