2002 UNIFORM BUSINESS REPORT (UBR) A9900001774 DOCUMENT # 1. Entity Name CC3 HOLDINGS, LTD. FILED 02 APR 23 AM 9:11 Principal Place of Business Mailing Address GARDENS CORPORATE CENTER GARDENS CORPORATE CENTER SECRETARY OF STATE TALLAHASSEE, FLORIDA 3801 PGA BOULEVARD, SUITE 555 3801 PGA BOULEVARD, SUITE 555 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 801 PGA Boulevard 3801 PGA Boulevard Suite 600 **DUE BY MAY 1, 2002** Suite 600 alm Beach Gardens, FL 33410 Palm Beach Gardens, FL 33410 1. FEI Number Applied For 65-0963500 Not Applicable \$8.75 Additional 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 Zip Code 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, typed or printed name of registered agent and title if applicable. 9. Cupital Contributions 10. Amount of Capital Contributions \$1,000.00 11. MAKE CHECK PAYABLE TO DEPT. OF STATE as Shown on record \$1,000 in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGIONALL 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 DOCUMENT # A99000001773 CR2E003 (9/01) STREET ADDRESS CC3 INVESTORS, LTD. 3801 PGA BOULEVARD, SUITE 903 600 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL 33410 DOCUMENT 4 STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 500005462895--8 -05/06/02--01089--004 DOCUMENT # NAME STREET ADDRESS ****141 25 ****141 STREET ADDRESS CITY-ST-ZIP C/TY-ST-ZIE DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUL NAME STREET ADDRESS STREE. ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 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 employeed to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND ROPE OF PRINTED NAME OF SIGNING GENERAL PARTNER

Patrick J. DiSalvo
Vice President

2/20/02

561-630 5055