## 2001 UNIFORM BUSINESS REPORT (UBR)

		00007962									
1. Entity Name CLARKSON FORSYTH STREET INVESTORS, L.L.C.							FILED				
Principal Place of Business 3100 UNIVERSITY BOULEVARD SOUTH. SUITE 200 JACKSONVILLE FL 32216			Mailing Address 3100 UNIVERSITY BOULF VARD SOUTH, SUITE 200 JACKSONVILLE FL 32216			S	ECRETARY OF ALLAHASSEE,	STATE FLORIDA	#### (### (##)	6 83118 3188 1880	
e of Busin	ess	3. Mailing Address			-						
etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
		City & State		4. FEI Number 59–3709068				oplied For ot Applicable			
	Country	Zip Co		ountry		5. Certif	icate of Status Desire	d 🗆 -	\$5.00 Ad	ditional	
6. Name	and Address of Current	rrent Registered Agent					7. Name and Address of New Registered Agent				
		UITE 200	,	Street A	treet Address (P.O. Box Number is Not Acceptable)						
				City				FL	Zip Cod	е	
med entity	submits this statement for	or the purpose of changing	its egister	ed office o	r registere	ed agent, c	r both, in the State of	Florida.	<del></del>		
nature, typed o	or printed name of registered agent	and title if applicable. (N	ÓTÉ Registere	ad Agent signat	ure required v	when reinstatio	9)	DAILE			
			11 11	) I '		State					
	MANAGING MEMB	BERS/MEMBERS	10.				ADDITION	IS/CHANGES			
MGR THE CLARKSON COMPANY 3100 UNIVERSITY BOULEVARD SOUTH, SUITE 200 JACKSONVILLE FL 32216				KE Eet address	•			,	☐ Change	Addition	
		☐ Delete	NAN Stri	EET ADDRESS		-	70000 -05/ ***	4217  15701	Change 76.1.7 01093	□ Addition ''55 -015 \$50-80	
		☐ Delete	NAM STRI	EET ADDRESS					☐ Change	☐ Addition	
		☐ Delete	NAM STRI	EET ADDRESS			,		Change	Addition	
		□ Delete	NAM STRI	E Et address					Change	Addition	
		☐ Delete	NAM						☐ Change	Addition	
	e of Businetc.  6. Name  RALDINE RSITY BOLLE FL 3  med entity  issue. typed of	P BOULEVARD SOUTH. SUITE 200 FL 32216  e of Business etc.  Country  6. Name and Address of Curren  FRALDINE G RSITY BOULEVARD SOUTH, S LLE FL 32216  med entity submits this statement for the statement of registered agent  MANAGING MEME IGR HE CLARKSON COMPANY 100 UNIVERSITY BOULEVARD	P BOULEVARD SOUTH. SUITE 200 FL 32216  Suite, Apt. #, etc.  City & State  Country  City & State  City & State  Country  City & State  City & State  City & State  Country  City & State  Country  City & State  City & State  Country  City & State  City & State  Country  City & State  City & State  City & State  Country  City & State  Country  City & State  Country  City & State  City & State  Country  City & State  City & State  Country  City & State  Count	P BOULEVARD SOUTH, SUITE 200 FL 32216  Be of Business  Betc.  Country  City & State  Country  Zip  Country  Zip  Country  City & State  Country  City & State  Country  City	A BOULEVARD SOUTH. SUITE 200 FL 32216  Be of Business  Betc.  Country  Suite, Apt. #, etc.  City & State  Country  Country  Zip  Country  Zip  Country  Country  City & State  City  Mare and Address of Current Registered Agent  Name  FRALDINE G  RIFER 1 32216  City  Make Check Pa  Able to Depart  MANAGING MEMBERS/MEMBERS  IN Make Check Pa  Belete  MANAGING MEMBERS/MEMBERS  IN ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  ITTLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  NAME  STREET ADDRESS  CITY-ST-ZIP	A BOULEVARD SOUTH. SUITE 200  FL 32216  3100 UNIVERSITY BOULE VARD SOUTH. SUITE 200  JACKSONVILLE FL 32216  a of Business  3. Mailing Address  etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  6. Name and Address of Current Registered Agent  FRALDINE G  RSITY BOULEVARD SOUTH, SUITE 200  LIE FL 32216  City  med entity submits this statement for the purpose of changing its egistered office or registered agent and the if applicable.  FILE N  Will FEE IS \$50.00  Make Check Pa  MANAGING MEMBERS / MEMBERS  GR  HE CLARKSON COMPANY 100 UNIVERSITY BOULEVARD SOUTH, SUITE 200  ACKSONVILLE FL 32216  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET A	A STREET ADDRESS  THE SECTION OF THE	Mailing Address Y BOULEVARD SOUTH. SUITE 200 FL 32216  Mailing Address 3100 UNIVERSITY BOULE VARD SOUTH. SUITE 200 ACKSONVILLE FL 3221E  SECRETARY OF TALL AHASSEE.  SUID, Apt. #, etc.  City & State  Country  Country  Country  Country  Country  Country  S. Certificate of Status Desire  Name Address of Current Registered Agent  Name RALDINE G RSITY BOULEVARD SOUTH, SUITE 200 LEE FL 32216  City  The Country Submits this statement for the purpose of changing its agistered office or registered agent, or both, in the State of City  Make Check Pa  Make Stream Address  CITY-ST-2P  Delete  Delete  Make Stream Address  CITY-ST-2P  Make Stream Addres	Mailing Address Y BOULEVARD SOUTH. SUITE 200 LOCKSONVILLE FL 32216  1. Mailing Address also University Boult vario South. Suite 200 LOCKSONVILLE FL 32216  1. Mailing Address also University Boult vario South. Suite 200 LOCKSONVILLE FL 32216  1. FEI Number 59–3709068  1. Name and Address of Current Registered Agent Country  1. Name and Address of New Registered RALDINE G RSITY BOULEVARD SOUTH, SUITE 200 LIE FL 32216  1. Name and Address of Florida.  1. Name and Address of New Registered REGISTY BOULEVARD SOUTH, SUITE 200 LIE FL 32216  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered Address (P.O. Box Number is Not Acceptable)  1. Only FL  1. Name and Address of New Registered Registered office or registered agent, or both, in the State of Florida.  1. Name and Address of New Registered Registered Agent nonaxer mounted agent age	######################################	

904-359-0045