2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005 DOCUMENT # A04000000229 1. Entity Name
WESMERE COVE PARTNERS, LTD. Principal Place of Business Mailing Address 1551 SANDSPUR RD P.O. BOX 4961 ORLANDO, FL 32802-4961 MAITLAND, FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc Suite, Apt. #, etc 03212005 CR2E003 (10/03) City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent B&C CORPORATE SERVICES OF CENTRAL FL INC Street Address (P.O. Box Number is Not Acceptable) 1551 SANDSPUR RD MAITLAND, FL 32751 City 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 I am familiar with, and accept the obligations of registered agent SIGNATURE Signature typed or printed name of registered agent and title if applicable DATE 10. Amount of Capital Contributions in FLORIDA to date 9. Capital Contributions \$50.00 as Shown on record 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 ADDRESS CHANGES ONLY 13. L04000011749 DOCUMENT / STREET ADDRESS CED CAPITAL HOLDINGS 2004 T. L.L.C. NAME STREET ADDRESS 1551 SANDSPUR RD 700050863467 CITY-SY-ZIP CITY-ST-ZIP MAITLAND, FL 32751 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filting 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 tive receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

By: CED CAPITAL Houplands 2804 T, L.L.C.; to seneral partnership. 407 741-8500 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

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