


~~2004~~ **LIMITED PARTNERSHIP ANNUAL REPORT**
Due By May 1, 2004

FILED
Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # A9500000815

1. Entity Name
CED PITTSFIELD HOUSING PARTNERS, LTD.



Principal Place of Business
**1551 SANDSPUR ROAD
 MAITLAND, FL 32751**

Mailing Address
**C/O BROAD AND CASSEL
 P.O. BOX 4961
 ORLANDO, FL 32802-4961**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03172004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3328952

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FLA, INC
 390 NORTH ORANGE AVE., SUITE 1100
 ORLANDO, FL 32801**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. **\$6,532,209.00**

10. Amount of Capital Contributions in FLORIDA to date.

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	A9500000744 CED CAPITAL HOLDINGS IV B, LTD. 1551 SANDSPUR ROAD MAITLAND, FL 32751	STREET ADDRESS	
		CITY - ST - ZIP	
			XXXXXXXXXXXX
			04/29/04-80014-025 526.25
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		STREET ADDRESS	
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		CITY - ST - ZIP	

STAPLE CHECK HERE

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: *TRICIA DODDY, Vice President* **4/20/04 407-741-8500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Circle Daytime Phone #