2000 UNIFORM BUSINESS REPORT (UBR) A98000001542 DOCUMENT # 1. Entity Name PILED SECRETARY OF STATE DIVISION OF CORPORATIONS CED ARBOR POINTE II. LTD. 00 MAR 10 AM 10: 37 Mailing Address Principal Place of Business 1551 SANDSPUR ROAD P.O. BOX 4961 MAITLAND FL 32751 ORLANDO FL 32802-4961 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number City & State APPLIED FOR 59-3518041 Not Applicable Ζp Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **B&C CORPORATE SERVICES OF CENTRAL FL. INC.** Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVE., SUITE 1100 ORLANDO FL 32801 City Zip Code e above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGGATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$50.00 \$775, 792.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. A95000000744 CR2E003 (9/99) DOCUMENT # STREET ADDRESS CED CAPITAL HOLDINGS IVB, LTD. <u> 100003172941: -0</u> NAME 1551 SANDSPUR ROAD -03/16/00--01079--016 STREET ADDRESS CITY - ST - ZIP MAITLAND FL 32751 CITY - ST - ZIP ****141.25<u>*****141.25</u> **DOCUMENT #** STREET ADDRESS NAME 100003172941--0 STREET ADORESS CITY-ST-ZIP -03/16/00 --01079--017 CITY-ST-ZIP ******8.75 *****8.75 DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 cute this report as required by Chapter 620, Florida Statutes

HOLDINGS IN B. LTD

PITAL HOLDINGS IN B. INC. GET

CITY-ST-ZP

STREET ADDRESS

DOCUMENT #

CITY-ST-ZIP

NAME STREET ADDRESS