


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A98000002538

1. Entry Name
SEMINOLE CO. STATE ROAD 46, LTD.



Principal Place of Business Mailing Address
1551 SANDSPUR ROAD **P.O. BOX 4961**
MAITLAND, FL 32751 **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



03302004 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
59-3544344 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 AVENUE, 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. \$7,930,050.00 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 #	A99000000829	STREET ADDRESS	
NAME	CED CAPITAL HOLDINGS XII, LTD.	CITY - ST - ZIP	
STREET ADDRESS	1551 SANDSPUR ROAD		
CITY - ST - ZIP	MAITLAND, FL 32751		
DOCUMENT #		STREET ADDRESS	UD0000138546
NAME		CITY - ST - ZIP	04/23/04-80013-001 526 25
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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 DODDU, Vice President Date: 4/23/04 Daytime Phone #: 407-741-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER