2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700072198 1. Entity Name CED CAPITAL HOLDINGS VIII, INC.						FILED OI FEB -5 PM 3: 20			
		Mailing Address P.O. BOX 4961 ORLANDO FL 32802-4961				SECHETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			TI	DO NOT WRITE IN T	HIS SPACE		
City & State		City & State			4.	FEI Number 59-3493151		pplied For ot Applicable	
Zip	Country	Zip	Coun	try	5.	Certificate of Status Desired	\$8.75 Ad	ditional	
	6. Name and Address of Current Re	gistered Agent	<u></u>		7. 1	Name and Address of New Registe			
				Name					
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N. ORANGE AVE., STE. 1100				Street Address (P.O. Box Number is Not Acceptable)					
ORL	ANDO FL 32801							ļ	
				City	-		FL Zip Coo	le	
Tax filing requirement and elects to do so. After MAY			W!!! FEE IS \$150.00 2001 Fee will be \$550.00 yable to Department of State			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.			
11.	OFFICERS AND DI	RECTORS	12.		ΑĽ	DDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST GINSBURG, ALAN H 1551 SANDSPUR ROAD MAITLAND FL 32751	☐ Delete				20000374 -02/20/01 ****150.	□ Change 1351 2 01082 00 ****]	□ Addition -012 50.00	
TITLE Name Street address City-St-Zip	VP GINSBURG, JEFFREY S 1551 SANDSPUR ROAD MAITLAND FL 32751	☐ Delete		ŀ			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROCK, JAY P 1551 SANDSPUR ROAD MAITLAND FL 32751	☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DOODY, TRICIA 1551 SANDSPUR ROAD MAITLAND FL 32751	☐ Delete					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCIARRINO, MICHAEL J 1551 SANDSPUR ROAD MAITLAND FL 32751	☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition	
13. I hereby a indicated of the conchanged	certify that the information supplied with thi d on this report or supplemental report is the reporation or the receiver or trustee empower, or on an attachment with an address, with	s filing does not qualify for e and accurate and that n red to execute this report all other like ampowered.	the exer ny signat as requir	mption stated in ure shall have t red by Chapter	Section he same 607, Flori	119.07(3)(i), Florida Statutes. I furthe legal effect as if made under oath; th ida Statutes; and that my name appe	r certify that the i at I am an officer ars in Block 11 o	nformation or director r Block 12 if	

SIGNATURE: