2001 UNIFORM BUSINESS REPORT (UBR) 0 8 37 FILED

10000001837 AND 0 0 0 0 8 301 FEB 26 PM 1: 53 DOCUMENT # A00000001837 SECRETARY OF STATE TALLAHASSEE, FLORIDA BAYBERRY HARBOR PARTNERS, LTD Mailing Address Principal Place of Business P.O. BOX 4961 1551 SANDSPUR ROAD ORLANDO, FL 32802 MAITLAND, FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Country -Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BYC CORPORATE SERVICES OF CENTRAL FLORIDA, INC. Street Address (P.O. Box Number is Not Acceptable) 390 N. ORANGE AVENUE, SUITE 1100 DRIANDO, FL 32801 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. (NOTE: Registered Agent signature required when reinstating) 411-MAKE CHECK PAYABLE TO DEPT. OF STATE 9. Capital Contributions— -10.-Amount of Capital Contributions ~ \$50.00 SEE REVERSE SIDE FOR FEE INFORMATION 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. -00000014900 DOCUMENT # STREET ADDRESS CEDCAPITAL HOLDINGS 2000 U, L.L.C. NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MAITCAND, FL 32751 DOCUMENT # STREET ADDRESS NAME <del>-01010---003</del> STREET ADDRESS \*\*\*\*141.25 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 CITY-ST-ZIP **DOCUMENT #** STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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

CED CAPITAL HOUSINGS 2000 U, LLC.

SIGNATURE: