

A00000001839

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A00000001839

1. Entity Name

LAKESIDE CLUB PARTNERS, LTD.

Principal Place of Business

Mailing Address

1551 SANDSPUR ROAD
MAITLAND, FL 32751P.O. BOX 4961
ORLANDO, FL 32802

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3689266

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

B+C CORPORATE SERVICES OF CENTRAL
FLORIDA, INC.
390 N. ORANGE AVENUE, SUITE 1100
ORLANDO, FL 32801

Name

Street Address (P.O. Box Numbers 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

SIGNATURE

(By authorized officer or partner of the registered agent, and if so, applicable)

(If CTR: Registered Agent signature required when so indicating)

DATE

9. Capital Contributions
as Shown on record

50.00

10. Amount of Capital Contributions
in FLORIDA to date.11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE HRS. 2001-01 FOR FEE INFORMATIONA 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 # L00000014901
NAME CED CAPITAL HOLDINGS 2000 W, LLC
STREET ADDRESS 1551 SANDSPUR ROAD
CITY-STATE-ZIP MAITLAND, FL 32751

STREET ADDRESS

CITY-STATE-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-STATE-ZIP

STREET ADDRESS

CITY-STATE-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-STATE-ZIP

STREET ADDRESS

CITY-STATE-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-STATE-ZIP

STREET ADDRESS

CITY-STATE-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-STATE-ZIP

STREET ADDRESS

CITY-STATE-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-STATE-ZIP

STREET ADDRESS

CITY-STATE-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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

CED CAPITAL HOLDINGS 2000 W, L.L.C.

SIGNATURE:

TRICIA DOBBY, MANAGER

2-19-01

407/741-8500

Date

Daytime Phone #

CR2E003 (11/00)