

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Mar 14, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A01000001086</b> 1. Entity Name <b>CREEKSIDE CLUB PARTNERS, LTD.</b>					
Principal Place of Business <b>1551 SANDSPUR ROAD</b> <b>MAITLAND, FL 32751</b>			Mailing Address <b>1551 SANDSPUR ROAD</b> <b>MAITLAND, FL 32751</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <b>P.O. BOX 4961</b> Suite, Apt. #, etc.			
City & State Zip      Country		City & State <b>ORLANDO, FL</b> Zip      Country <b>32802      US</b>		4. FEI Number <b>59-3741859</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>B&amp;C CORPORATE SERVICES OF CENTRAL FLORIDA</b> <b>390 NORTH ORANGE AVE. SUITE 1100</b> <b>ORLANDO, FL 32801</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$4,441,141.00</b>		10. Amount of Capital Contributions in FLORIDA to date.			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	NAME		STREET ADDRESS		
	STREET ADDRESS		CITY-ST-ZIP		
	CITY-ST-ZIP				
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	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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.					
<b>BY: CED CAPITAL HOLDINGS 2001 I, L.L.C., general partner</b> <b>SIGNATURE: _____</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <b>TRICIA BOBBY, MANABEY</b>			Date <b>3/9/05</b> Daytime Phone # <b>407/741-8500</b>		

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