2003 LIMITED PARTNERSHIP

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DOCUMENT # A0100001524 1. Entity Name BRITTANY BAY PARTNERS III, LTD. Principal Place of Business 1551: SANDSPUR ROAD MAITLAND FL 32751 Mailing Address P.O. BOX 4961 ORLANDO FL 32802-4961 2. Principal Place of Business 3. Mailing Address				FILED SECRETARY OF STATE DIVISION OF CORPORATIONS O3 MAR 20 PM 1: 22	
Suite, Apt. #, etc. Suite, Apt. #, etc.				DUE BY MAY 1, 2003	
City & State	City & State	& State		4. FEI Number 59-3696276	Applied For
Zip Country	Zip Country		ry		Not Applicable 3.75 Additional B. Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent Name		ent
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVE. SUITE 1100 ORLANDO FL 32801		<u>.</u>	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 Signature, typed or printed name of registered agent and title if applicable. DATE					
Capital Contributions as Shown on record. \$50.00 10. Amount of Capital Contributions in FLORIDA to date.			11. MAKE CHECK PAYABLE TO SEE REVERSE SIDE FOR F		
A GENERAL PARTNER NOTE: General Partners MA	THAT IS A BUSINESS EN AY NOT be changed on t	NTITY MU he form;	JST BE REGIST an amendment	ERED AND ACTIVE WITH THIS OFFICE. must be filed to change a general partner.	er.
12. GENERAL PARTNER INFORMATION 13.				ADDRESS CHANGES ONLY	
DOCUMENT / A99000001991 NAME CED CAPITAL HOLDINGS XVI, LTD.			T ADDRESS		,
STREET ADDRESS CITY-ST-ZIP MAITLAND FL 32751		CITY-	ST-ZIP		
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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 CEO CAPITAL HOLD NOSSIVI, His managing general partner SIGNATURE: SIGNATURE NO DEED OR PRINTED NAME OF PRESSIVER. Date Dayline Phone #					