


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		<div style="transform: rotate(-45deg); transform-origin: center;"> RECEIVED TALLAHASSEE, FLORIDA 05 JUL 26 PM 4:20 </div>	
DOCUMENT # A02000000447					
1. Name of Limited Partnership <div style="text-align: center; font-size: 1.2em;">KENSINGTON CLUB PARTNERS, LTD.</div> <div style="text-align: right; font-size: 1.5em;">03</div>					
2. Principal Office Address 1551 Sandspur Road <small>Suite, Apt. #, etc.</small>		3. Mailing Office Address P.O. Box 4461 <small>Suite, Apt. #, etc.</small>		4. Date Formed or Registered To Do Business in Florida 3-26-2002	
City & State Maitland, Florida <small>Zip</small> 32751 <small>Country</small> U.S.		City & State Orlando, Florida <small>Zip</small> 32802 <small>Country</small> U.S.		5. FEI Number <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					
7a. Capital Contributions as shown on Record: <div style="text-align: center; font-size: 1.2em;">50.00</div>					
7b. Amount of Capital Contributions in FLORIDA to date:					
8. Name and Address of Current Registered Agent					
Name BTC Corporate Services of Central Florida					
Street Address (P.O. Box Number is Not Acceptable) 390 N. Orange Avenue					
Suite, Apt. #, Etc. Suite 1100					
City Orlando		State FL		Zip Code 32801	
9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
10. Name(s) of General Partner(s) CED CAPITAL HOLDINGS 2002 T, L.L.C.		Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1551 Sandspur Road		City, State and Zip Code Maitland, FL 32751 100058010961 07/28/05--01033--012 **1932.50	
				10a. Registration Document Number L02000006850	
<div style="font-size: 2em; font-weight: bold; opacity: 0.5;">REINSTATEMENT</div> <div style="font-size: 1.5em; font-weight: bold;">2003-2005</div>					
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.					
By: CED CAPITAL HOLDINGS 2002 T, L.L.C. its general partner					
SIGNATURE _____				DATE 7/25/05	
Typed or Printed Name of General Partner Signing Form TRICIA DODDY, MANAGER				Telephone Number 407.741.8500	

CR02038 (10/02)