

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

2006 JAN 25 PM 3: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A04000000166 1. Entity Name THE CLUB AT EUSTIS VILLAGE PARTNERS, LTD.					
Principal Place of Business 1551 SANDSPUR RD. MAITLAND, FL 32751		Mailing Address P.O. BOX 4961 ORLANDO, FL 32802-4961			
2. Principal Place of Business Suite, Apt #, etc		3. Mailing Address Suite, Apt #, etc			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 55-0860325	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FL INC 390 N ORANGE AVE, STE 1100 ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name Street Address (P O Box Number is Not Acceptable) City		
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			FL Zip Code		
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and (if applicable)</small>					
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00					
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.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	L04000008238 CED CAPITAL HOLDINGS 2004 O, L.L.C. 1551 SANDSPUR RD. MAITLAND, FL 32751		STREET ADDRESS CITY-ST-ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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. By: <u>CED Capital Holdings 2004 O, L.L.C., its general partner</u>					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date _____ <small>Daytime Phone #</small>		



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TRICIA DOODY, MANAGER