DOCUI		# A2989	FILED					8			
1. Entity Name HIGHLAND OAKS PARTNERS, LTD.						02 FEB 15 PH 1: 59					AV
HIGHLAI	ND UAKS I	AHINERS, LIU.	SECRETARY OF STATE TALLAHASSEE, FLORIDA								
Principal Place	e of Busines	· · · · · · · · · · · · · · · · · ·	- TALLA	MASSEE, FL	20RIDÃ						
1551 SANDSP			% BROAD AND CA P.O. BOX 4961	ASSEL							
MAITLAND FL 32751 P.O. BOX 4961 ORLANDO FL 32802-4961						1 1894814 184	1 (1811 (1818) (1811) (1811)	II <b>6</b> 111 <b>0</b> 1011 <b>0</b> 10		 	
Principal Place of Business     3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DUE BY MAY 1, 2002					
City & State			City & State			4. FEI Number	59-3059044		F	Applied Fo	
Zip Country		Country	Zip	Coun	try	5. Certificate of S	Status Desired		8.75 ee Req	Additional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
P C CODDODATE SEDVICES OF CENTRAL ELIMIC					Name						
B & C CORPORATE SERVICES OF CENTRAL FL,INC 390 NORTH ORANGE AVENUE					Street Address (P.O. Box Number is Not Acceptable)						
SUITE 11											
ORLANDO FL 32801				City				FL	Zip (	Code	
8. The above	named entit	y submits this statement for	the purpose of chang	ing its registere	ed office or regist	ered agent, or both, i	n the State of Flori	ida.			
SIGNATURE _								·			
9. Capital Cor	Signature, typed	or printed name of registered agent a \$4,382,441.00		Capital Contrib	butions		11. MAKE CHECK	DATE PAYABLE	TO DEP	T. OF STATE	
as Shown o	on record.	SENERAL PARTNER T	in FLORID	A to date.		STEDED AND ACT	SEE REVERS			FORMATION	<u> </u>
<del></del>	NOTE	General Partners MA	Y NOT be changed	on the form	; an amendme	ent must be filed t	o change a ger	neral parti	ner.		
12. GENERAL PARTNER INFORMATION DOCUMENT / A92000000009				13,			ADDRESS CHAP	NGES ONLY			<del>ق</del>
NAME	TREET ADDRESS ITY-ST-ZIP COLUMENT / COLUMENT / CED CAPITAL HOLDINGS I, LTD., A FL. 1551 SANDSPUR ROAD MAITLAND FL 32751		A FL. L.P.		ET ADDRESS						CR2E003 (9/01)
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CITY-ST-ZIP				0111			<u></u>			<del></del>	
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STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP						,
indicated	on this repo er or trustee B	e information supplied with rt is true and accurate and empowered to execute this ED CAP TACKS	that my signature shall s report as required by	have the same Chapter 620, I	e legal effect as it	made under oath; the	lorida Statutes. I f at I am a General neral p	further certif Partner of th	y that the limite	he information partnersh	ip or