

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

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

DOCUMENT # A31730 1. Entity Name MANATEE WOODS APARTMENTS, LIMITED PARTNERSHIP					
Principal Place of Business 1551 SANDSPUR RD. MAITLAND, FL 32751			Mailing Address C/O BROAD AND CASSEL P.O. BOX 4961 ORLANDO, FL 32802-4961		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3129489	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENTRAL FLA, INC. 390 NORTH ORANGE AVENUE ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$6,708,472.00		10. Amount of Capital Contributions in FLORIDA to date.			
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 #	A93000000236		STREET ADDRESS		
NAME	CED CAPITAL HOLDINGS II, LTD.		CITY - ST - ZIP		
STREET ADDRESS	1551 SANDSPUR RD.		STREET ADDRESS		
CITY - ST - ZIP	MAITLAND, FL 32751		CITY - ST - ZIP		
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STREET ADDRESS			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.					
BY: CED CAPITAL HOLDINGS II, LTD., General Partner BY: CED CONSTRUCTION, INC., General Partner					
SIGNATURE: _____			Date 3/9/05 Daytime Phone # 407/744-8500		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER MICHAEL J. SCIARRINO, PRES.					



01062005 Chg-LP CR2E003 (10/03)

4. FEI Number **59-3129489** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**B&C CORPORATE SERVICES OF CENTRAL FLA, INC.
 390 NORTH ORANGE AVENUE
 ORLANDO, FL 32801**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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BY: **CED CAPITAL HOLDINGS II, LTD., General Partner**
 BY: **CED CONSTRUCTION, INC., General Partner**

SIGNATURE: _____ Date **3/9/05** Daytime Phone # **407/744-8500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
MICHAEL J. SCIARRINO, PRES.

STAPLE CHECK HERE