

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A32893**

1. Entity Name

**SANFORD ARMS ASSOCIATES, L.P., A CALIFORNIA LIMI**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 APR -4 AM 10: 29



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1551 SANDSPUR ROAD MAITLAND FL 32751	Mailing Address % BROAD AND CASSEL P.O. BOX 4961 ORLANDO FL 32802-4961
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number <b>59-3028028</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FL, INC**  
**390 NORTH ORANGE AVENUE**  
**SUITE 1100**  
**ORLANDO FL 32801**

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$2,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$2,618,001.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**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 #	<b>A92000000009</b>
NAME	<b>CED CAPITAL HOLDINGS I, LTD.</b>
STREET ADDRESS	<b>1551 SANDSPUR ROAD</b>
CITY - ST - ZIP	<b>MAITLAND FL 32751</b>

STREET ADDRESS	
CITY - ST - ZIP	

DOCUMENT #	
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STREET ADDRESS	
CITY - ST - ZIP	

STREET ADDRESS	<b>500003203725--6</b>
CITY - ST - ZIP	<b>-04/11/00--01030--020</b>
	<b>*****526.25 *****526.25</b>

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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

**SIGNATURE:** **CED CAPITAL HOLDINGS I, LTD.**  
**134 CED CONSTRUCTION, INC. managing general partner**  
**SIGNATURE REQUIRED**  
**MICHAEL J. SCARFINO, PRESIDENT**  
Date **3-8-00** Day/line Phone # **407/741-8500**

CR2E003 (9/99)