

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

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

<b>DOCUMENT # A98000002535</b> 1. Entity Name <b>RACEWAY POINTE PARTNERS, LTD.</b>					
Principal Place of Business <b>1551 SANDSPUR ROAD</b> <b>MAITLAND, FL 32751</b>			Mailing Address <b>P.O. BOX 4961</b> <b>ORLANDO, FL 32802-4961</b>		
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 <b>59-3544340</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>B&amp;C CORPORATE SERVICES OF CENT. FLA., INC.</b> <b>390 NORTH ORANGE AVENUE, SUITE 1100</b> <b>ORLANDO, FL 32801</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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. <b>\$5,120,166.00</b>		10. Amount of Capital Contributions in FLORIDA to date.			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	A98000000398		STREET ADDRESS		
NAME	CED CAPITAL HOLDINGS X, LTD.		CITY-ST-ZIP		
STREET ADDRESS	1551 SANDSPUR ROAD		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: <u>CED CAPITAL HOLDINGS X, LTD.</u> general partner BY: <u>CED CAPITAL HOLDINGS X, INC.</u> its general partner					
SIGNATURE: _____			Date <u>3/9/05</u> Daytime Phone # <u>407/741-8800</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <b>TRICIA DODDY, VICE PRES.</b>					



01062005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3544340 Applied For Not Applicable

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

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$5,120,166.00 10. Amount of Capital Contributions in FLORIDA to date.

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BY: CED CAPITAL HOLDINGS X, LTD. general partner  
 BY: CED CAPITAL HOLDINGS X, INC. its general partner  
 SIGNATURE: \_\_\_\_\_ Date 3/9/05 Daytime Phone # 407/741-8800  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**TRICIA DODDY, VICE PRES.**