## **2000 UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # A9900001572					FILED	
MILLENIA COVE PARTNERS, LTD.				FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
Principal Place of Business Mailing Address 1551 SANDSPUR ROAD 1551 SANDSPUR ROAD MAITLAND FL 32751 MAITLAND FL 32751-6132					OOFEB-I PM 4: 41	
Principal Place of Business     3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, e					DO NOT WRITE IN THIS SPACE	
City & State		Sity & State OR ANDO, FC			4. FEI Number Applied For 54-3607191 Not Applied For	
Zip	Country	32802 Count			5. Certificate of Status Desired   \$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent	
				Name	<del></del>	
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVE., STE 1100				Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL FL						
				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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
9. Capital Contributions \$50.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE						
as Shown on record.  In FLORIDA to date.  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 M.	AY NOT be changed on t	he form	UST BE REGIS ; an amendmer	TERED AND ACTIVE WITH THIS OFFICE.  at must be filed to change a general partner.  ADDRESS CHANGES ONLY	
12, DOCUMENT#	1.0000000000					
NAME STREET ADDRESS CITY-ST-ZIP	CED CAPITAL HOLDINGS XIV A LLC 1551 SANDSPUR ROAD MAITLAND FL		1	-ST-ZIP	9000031238190 -02/04/0001035001 ****141.25 ****141.25	
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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 any that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the innited partner						
SIGNATURE: SIGNA/URE REQUIRED 13100 407/741-8506						