

2000 UNIFORM BUSINESS REPORT (UBR)

0001300 A:

DOCUMENT # A99000001885

1. Entity Name

CED CAPITAL HOLDINGS II B, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 18 PM 3:26

Principal Place of Business

1551 SANDSPUR ROAD
MAITLAND FL 32751

Mailing Address

1551 SANDSPUR ROAD
MAITLAND FL 32751-6132

2. Principal Place of Business

3. Mailing Address

P.O. Box 4961

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ORLANDO, FL

4. FEI Number

59-3627435

Applied For

Not Applicable

Zip

Country

Zip

Country

32802

USA

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

B & C CORPORATE SERVICES OF CENTRAL FLORID
A, INC. 390 NORTH ORANGE AVENUE, SUITE 110
0
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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$50.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # M99000001798
NAME CED CAPITAL HOLDINGS II, L.L.C.
STREET ADDRESS 1551 SANDSPUR ROAD
CITY-ST-ZIP MAITLAND FL 32751

STREET ADDRESS
CITY-ST-ZIP 300003216713---9
-04/20/00--01070--010
****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 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: GENE HARRIS, PRESIDENT

4-17-00

Date

Daytime Phone #

CR2E003 (9/99)