2005 LIMITED PARTNERSHIP ANNUAL REPORT FILED

Due By May 1, 2005

FILED

Mar 14, 2005 08:00 AM

STAPLE CHECK HERE

DOCUMENT # B9400000 1. Entity Name WOODBERRY WOODS PARTNER		-		Secretary of State	•
Principal Place of Business Mailing Address 1551 SANDSPUR ROAD P.O. BOX 4961 MAITLAND, FL 32751 ORLANDO, FL 38202		2			
2. Principal Place of Business 3. Mailing Address					:
Suite, Apt. #, etc. Suite, Apt. #, etc.				01072005 Chg-LP CR2E003 (10/03)	
City & State	City & State			4. FEI Number Applied Fo 59-3231193 Not Applice	
Zip Country	Zip	Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Curren	nt Registered Agent		Name	7. Name and Address of New Registered Agent	
B&C CORPORATE SERVICES OF CENTRAL FLA.,INC 390 NORTH ORANGE AVENUE, SUITE 1100				(P.O. Box Number is Not Acceptable)	
ORLANDO, FL 32801					
			City	FL Zip Code	\neg
The above named entity submits this statement the obligations of registered agent.	for the purpose of changing	its register	red affice or registe	red agent, or both, in the State of Florida. I am familiar with, and acco	ept
SIGNATURE - Signature, typed or printed name of registered age	nt and title if applicable.	 =		бите	
9. Capital Contributions as Shown on record. \$10,536,493.24	10. Amount of Cap in FLORIDA to		ibutions		
				TERED AND ACTIVE WITH THIS OFFICE. Int must be filed to change a general partner.	
12. GENERAL PARTN		13.		ADDRESS CHANGES ONLY	\exists
DOCUMENT # A93000000229 NAME CED CAPITAL HOLDINGS III, LTD. STREET ADDRESS 1551 SANDSPUR ROAD			EET ADDRESS		
CITY-ST-ZIP MAITLAND, FL 32751			Y-ST-ZIP		
NAME STREET ADDRESS		STR	IEET ADDRESS		
CITY-ST-ZIP		CITY	Y-ST-ZIP		
DOCUMENT # NAME		STR	EET ADDRESS	000000262707 03/14/05-80066-018-526-25	
STREET ADDRESS CITY-SY-ZIP		CITY	Y-ST-ZIP	CONTRACTOR OF CASE	
DOCUMENT # NAME	,	STR	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		GITY	Y-ST-ZIP		
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STREET ADDRESS CITY - ST - ZIP		СІТУ	r·ST-ZIP		
DOCUMENT# NAME		STRI	EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		CITY	Y+ST-ZIP		
indicated on this report is true and accurate an the receiver or trustee empowered to execute the receiver of trustee empowered to execute the capacitation of the receiver that the receiver the receiver that the receiver the receiver that the receiver that the receiver that the receiver the receiver that the receiver that the receiver that the receiver the receiver that the receiver that the receiver that the receiver the receiver that the receiver that the receiver that the receiver the receiver that the receiver that the receiver the receiver the receiver the receiver the receiver the receiver that the receiver the receiver the receiver the receiver the receiv	th this filling does not qualify d that my signature shall have his report as required by Charles and Sall, LTD and Charles and Sall	for the exerce the same apter 620,	emption stated in Se e legal effect as if r Florida Statutes Portina	ection 119.07(3)(i), Florida Statutes. I further certify that the information made under oath; that I am a General Partner of the limited partnerships.	n p or
	OR PRINTED HAME OF SIGNING GEN	ERAL PARTN	ER	Date Daytime Phone #	_