

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002335

FILED  
Apr 09, 2008  
Secretary of State

Entity Name: CED CAPITAL HOLDINGS XIV R, L.L.C.

## Current Principal Place of Business:

329 NORTH PARK AVENUE  
SUITE 300  
WINTER PARK, FL 32789

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 4961  
ORLANDO, FL 328024961

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 NORTH ORANGE AVENUE, STE 1400  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: M ( ) Delete  
Name: CED CAPITAL HOLDINGS, XI, LTD.  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: ALAN, GINSBURG H  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: SCIARRINO, MICHAEL J  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: DOODY, TRICIA  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: JAY, BROCK P  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: MGR ( ) Delete  
Name: MISSIGMAN, PAUL  
Address: 329 N. PARK AVENUE, STE 300  
City-St-Zip: WINTER PARK, FL 32789

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: ALAN, GINSBURG H  
Address: 1551 SANDSPUR ROAD  
City-St-Zip: MAITLAND, FL 32751

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAUL M. MISSIGMAN, MGR

M

04/09/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date