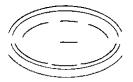
FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 30, 2002 8:00 am Secretary of State DOCUMENT # L0100007096 01-27-2002 90037 019 ****50.00 CED/CONCORD EMPLOYEE INCENTIVE OWNERSHIP 1998 CA SH FLOW, LLC Principal Place of Business Mailing Address 1551 SANDSPRUR ROAD 1551 SANDSPRUR ROAD MAITLAND FL 32751 MAITLAND FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$5.00 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent . Name and Address of New Registered Agent Name CED CAPITAL HOLDINGS IX, LTD. Street Address (P.O. Box Number is Not Acceptable) 1551 SANDSPRUR ROAD MAITLAND FL 32751 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$50.00 Make Check Pevable to Department of State Due By September 25, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. Addition TITLE Change NAME NAME CR2E083 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE . Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. 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 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.

Date

Daytime Phone #

SIGNATURE AND TYPED OR P



1551 SANDSPUR ROAD = MAITLAND, FLORIDA 32751 = (407) 741-8500 = FAX (407) 629-9060

July 25, 2002

Limited Liability Company Division of Corporations P.O Box 6478 Tallahassee, Florida 32314-6478

RE: CED/CONCORD EMPLOYEE INCENTIVE OWNERSHIP 1998 GASH FLOW, LLC DOCUMENT (L01000007096)

We received a second notice to file the 2002 Uniform Business Report for the above entity. This report was filed on January 22, 2002. I have enclosed a copy of the report and a copy of the cancelled check. After reviewing these documents, please make the necessary adjustments to your records so that the above entity will be current with the state filing requirements.

Should you need any additional information, I can be contacted at this telephone number (407) 741-8511.

Sincerely,

Gennette Mock, Tax Accountant,

CED/CONCORD EMPLOYEE INCENTIVE

OWNERSHIP 1998 CASH FLOW, LLC

Enclosure

We received a scroom mation to distribe 2002. One one distribuse Regions for the one convergence of the conv

2002 UNIFORM BUSINESS REPORT (UBR)				
DOCUMENT # LO10000 . 096 1. Entity Name CED/CONCORD EMPLOYEE INCENTIVE OWNERSHIP 1998 CA				Hachment 40222
SH FLOW, LLC				110000
Principal Place of Business Mailing Address				40222
1551 SANDSPRUR ROAD MAITLAND FL 32751 MAITLAND FL 32751 MAITLAND FL 32751				
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number Applied For S9-3742835 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S5.00 Additional Fee Required
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
CED CAPITAL HOLDINGS IX, LTD. 1551 SANDSPRUR ROAD				Address (P.O. Box Number is Not Acceptable)
MA	ITLAND FL 32751			
			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				
	.•	FILE NO Make Check Pay Due	WIII FEÉ IS	\$50:00 tment of State
9. TITLE	MANAGING MEMBE	RS/MANAGERS Delete	10.	ADDITIONS/CHANGES
NAME STREET ADDRESS CITY-ST-ZIP		. Delete	NAME STREET ADDRESS CITY-ST-ZIP	Manager ☐ Change ☐ Addition Paul Missigman 1551 Sandspur Road Maitland, Florida 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
11. 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 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 /- 22 5 407-741-8505 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Desprise Phone #				

