## 2003 LIMITED LIABILITY COMPANY

## **UNIFORM BUSINESS REPORT (UBR** DOCUMENT # L02000022118 FILED 1. Entity Name 2003 FEB 27 PM 1: 43 CED CAPITAL HOLDINGS 2003 A. L.L.C. DIVILION OF CORPORATIONS TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1551 SANDSPUR ROAD 4551-SANDSPUR ROAD MAITLAND FL 32751 MAITLAND FL 32751-2. Principal Place of Business 3. Mailing Address ?o.Box Suite, Apt. #, etc. Suite Apt #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVENUE, SUITE 1100 ORLANDO FL 32801 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 the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGR TITLE □ Delete TITLE Change ☐ Addition BROCK, JAY P NAME NAME 300013546763 STREET ADDRESS 1551 SANDSPUR ROAD STREET ADDRESS 03/05/03--01043--009 \*\*55.00 CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL 32751 TITI F ☐ Delete **Addition** TITLE ☐ Change NAME GINSburg, ALAN H. NAME STREET ADDRESS 1551 SANDSPUR ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAITLAND TITI F MGR\_ ☐ Defete TITLE Change 🛣 Addition NAME SCIARRINO MICHAEL S.

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 ergowered to execute this report as required by Chapter 608, Florida Statutes.

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SIGNATURE AND TYPED OR PRINTED NAME G MENBER, MANAGER OR AUTHORIZED REPRESENTATIVE

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