LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000031512

1. Entity Name

CED Capital Holdings 2003 M, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN 13 PM 2:19

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1551 Sandspur Road	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Maitland, Florida	City & State
Zip: 32751 Country: US	Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3614592 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: B&C Corporate Services of Central Florida, Inc.

Street Address (P.O. Box Number is Not Acceptable): 390 N. Orange Ave., Suite 1100

City: Orlando **FL** Zip Code: 32801

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 _____ DATE

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

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Manager Alan H. Ginsburg 1551 Sandspur Road Maitland, Florida 32751
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Manager Michael J. Sciarrino 1551 Sandspur Road Maitland, FL 32751
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Manager Jay P. Brock 1551 Sandspur Road Maitland, FL 32751
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Manager Tricia Doody 1551 Sandspur Road Maitland, FL 32751
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Manager Paul Missigman 1551 Sandspur Road Maitland, FL 32751
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CR2E083B (12/01)

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: _____ 1-9-03 407/241-8801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

TRICIA DOODY
MANAGER