2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FIED

OL ADD to a

DOCUMENT # L0300004210				04 HPK 12 PM 3: 36		
1. Entity Name CED CAPITAL HOLDINGS 2003 R, L.L.C.				SECRETARY OF STATE TALLAHASSEE. FLORIDA		
Principal Place of Bu	usiness	Mailing Address				
1551 SANDSPUR ROAD		1551 SANDSPUR ROAD		\mathcal{H}		
Maitland, Fl 321	/51	MAITLAND, FL 32751	/			
2. Principal Place of Business		P. D. Box 4941				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03032004 Chg-LLC CR2E083 (10/03)		
City & Olyan		0.10				
City & State		ORLANDO, FC			plied For Applicable	
Zip	Country	Zip	Country	5 Certificate of Status Desired \$5.00 Addi	tional	
	Name and Address of Current	Bacistand Apagt	USA	7. Name and Address of New Registered Agent	<u></u>	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name						
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVENUE, SUITE 1100			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
ORLANDO, FL		100 Street Address (F.O. DOX Number is Not Acceptable)		
. , _			·			
			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. I am familiar with, and accept						
the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Filing Fee is \$50.00 Due by May 1, 2004				Make check payable to Florida Department of State		
				1,01121 30,021		
9.	MANAGING MEMBE		10.	ADDITIONS/CHANGES	Ch dun.	
TITLE NAME		☐ Delete	NAME 1	Brock, Jay P.	ddition	
STREET ADDRESS			STREET ADDRESS	551. SandSour 1880		
CITY-ST-ZIP			CITY-ST-ZIP	1aitlend , FC 32751		
TITLE NAME		☐ Delete	VALUE	CINSburg ALAN H. Change	Addition	
STREET ADDRESS			STREET ADDRESS	sel candidul kood	1	
CITY-ST-ZIP			G111-31-21	Maitana ~ C33.31		
TITLE NAME		☐ Delete	TITLE S	CIARRINO, Michael J.	Addition	
STREET ADDRESS			STREET ADDRESS [551 Sandspur Road	1	
CITY-ST-ZIP			CITY-ST-ZIP	naithand, FL 32751		
TITLE NAME		☐ Delete	TITLE NAME	□ Change	Addition	
STREET ADDRESS			STREET ADDRESS	SEI Sandspur Road	•	
CITY-ST-ZIP			CITY-ST-ZIP	naiHand Ec 32751		
TITLE		☐ Delete		NOR Change	Addition	
NAME STREET ADDRESS.			NAME STREET ADDRESS	lissigman, tau		
CITY-ST-ZIP			CITY-ST-ZIP	15/50005pur 16 300 10/10/05/10/10/15/10/15/10/10/10/10/10/10/10/10/10/10/10/10/10/		
TITLE		☐ Delete	TITLE	04/13/0401017007b chillip	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP		<u></u>	
11. I hereby certify that the information supplied with this fligg 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.						
				West 1460 - THE	8500	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 1 Date Daytime Phone #						

TRICIA Doody, Manage