## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

ر مسر <b>د</b>	ANNUAL	REPURI				E 11	_		
DOCUMENT # L03000048915  1. Entity Name CED CAPITAL HOLDINGS 2004 D, L.L.C.				FILED  04 JAN 22 AM 9: 22  SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Principal Place of Business 1551 SANDSPUR RD MAITLAND, FL 32751		Mailing Address 1551 SANDSPUR RD MAITLAND, FL 32751					III <b>B</b> Biit <b>Band</b>		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01	152004	Chg-LLC	CR2E	083 (10/03)	
City & State		City & State		4. F	El Number				plied For t Applicable
Zip	Country	Zip	Country			Status Desired	X	\$5.00 Add Fee Required	
	6. Name and Address of Current F	legistered Agent		7. N	lame and A	ddress of New F	Reģistered	Agent	
B&C CORPORATE SERVICES OF CENTRAL FL, INC 390 N ORANGE AVE, STE 1100 ORLANDO, FL 32801				Name Street Address (P.O. Box Number is Not Acceptable)					
·			City				FL	- 1	
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office o	r registered age	ent, or both,	in the State of Fl	orida. I am	familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent ar	d title if applicable. (NOTE: F	Registered Agent signar	ture required when re	instating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2004								payable to nent of State	
9.	MANAGING MEMBER	S/MANAGERS	10.			ADDITIONS	/CHANGE	S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BROCK, JAY P 1551 SANDSPUR RD MAITLAND, FL 32751	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C	<b>1. C) C</b> 01/30/0	00279 401016-	131 -006	□ Change <b>6 1</b> **55.00	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY+ST-ZIP	1221 7	anasf	Michael our fload FL 32		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mait	TRIC	IA Ir Road FL 327		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Maitle	andsp	lan H. Dur Road FL 3275/	,	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mer Missig 1551 S Maitl	man, ands, and,	Paul pur Road FL 3279	L 7/	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition
indicated	certify that the information supplied with to on this report is true and accurate and tibility company or the receiver or trustee	hat my signaturę shall have the	e same legal effe	ect as if made u	nder oath; t	hat I am a manag	I further ce	rtify that the in er or managei	formation r of the

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

407-741-8500