

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001312

1. Entity Name
CED CAPITAL HOLDINGS XI, L.L.C.

Principal Place of Business
1551 SANDSPUR ROAD
MAITLAND FL 32751

Mailing Address
1551 SANDSPUR ROAD
MAITLAND FL 32751-6132

2. Principal Place of Business

3. Mailing Address
P.O. BOX 4961

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
ORLANDO, FL

Zip

Country

Zip
32802

Country

USA

4. FEI Number
42-1484419

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE



APPROVED
AND
FILED

00 MAR 31 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

rf 4/12

0000573 AF

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 N ORANGE AVENUE
SUITE 1100
ORLANDO FL 38201

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box 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.

SIGNATURE

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 Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE NAME MGRM
STREET ADDRESS CED CAPITAL HOLDINGS, L.L.C.
CITY-ST-ZIP 1551 SANDSPUR ROAD
MAITLAND FL 32751

☐ Delete

TITLE NAME
STREET ADDRESS
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10. ADDITIONS / CHANGES

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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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: GENE HARRIS, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)