2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

Due By May 1, 2008 SECRETARY OF STATE **DOCUMENT # A00000000334** TALLAHASSEE, FLORIDA 1. Entity Name PRICE FAMILY HOLDINGS, LTD. 08 MAR 12 AM 8: 41 Principal Place of Business Mailing Address 2401 N.W. BOCA RATON BLVD., SUITE 100 2401 N.W. BOCA RATON BLVD., SUITE 100 BOCA RATON, FL 33431 BOCA RATON, FL 33431 ŗ 02142008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0912728 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEVLIN, TIMOTHY CPA DO NOT WRITE 2401 N.W. BOCA RATON BLVD., SUITE 100 BOCA RATON, FL 33431 IN THIS SPACE 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 agent and title if applicable FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION DOCUMENT # P98000100274 PRICE HOLDINGS, INC. STREET ADDRESS 2401 N.W. BOCA RATON BLVD., SUITE 100 CITY-ST-ZIP BOCA RATON, FL 33431 DOCUMENT # NAME 400120724804 STREET ADDRESS CITY - ST - ZIP DOCUMENT # DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes SIGNATURE:

Daytime Phone #