2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

FILED DOCUMENT # A0000001161 Apr 22, 2008 8:00 A.M. Secretary of State 1. Entity Name KATÓPODIS FAMILY HOLDINGS, LTD. Principal Place of Business Mailing Address 3842 E. MILLERS BRIDGE RD. 3842 E. MILLERS BRIDGE RD. TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 02282008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3660291 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KATOPODIS, JOHN DO NOT WRITE 3842 E. MILLERS BRIDGE RD. TALLAHASSEE, FL 32312 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, typed or printed name of registered 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 17. P00000068260 DOCUMENT # KATOPODIS HOLDINGS, INC. NAME STREET ADDRESS 3842 E. MILLERS BRIDGE RD. CITY-ST-ZIP TALLAHASSEE, FL 32312 300124890163 04/22/08--01002--009 ***508.75 DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT : NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS

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:

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GNATURE AND TYPED OR POINTED NAME OF SIGNING GENERAL PARTNER

4/18/08

PSO-544-6646