2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A05000000346 FILED RHB FAMILY DEVELOPMENT, LTD. 07 FEB 26 AM 9: 37 Principal Place of Business Mailing Address 533 W. NEW ENGLAND AVE., SUITE C P.O. BOX 350 WINTER PARK, FL 32789 WINTER PARK, FL 32790-0350 01232007 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2436331 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent MOA LAURA -BELLOWS: DANIEL B DO NOT WRITE 533 W. NEW ENGLAND AVE., SUITE C WINTER PARK, FL 32789 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. LAURA MOA 1-27-07 SIGNATURE or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$500.00 After May 1, 2007, 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. 12. GENERAL PARTNER INFORMATION DOCUMENT A NAME WINTER PARK REDEVELOPMENT MANAGEMENT CORP 533 W. NEW ENGLAND AVE., SUITE C STREET ADDRESS CITY-ST-ZIP WINTER PARK, FL 32789 900089611479 02/27/07--01056--009 **\$00.00 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY - ST - ZIP IN THIS SPACE DOCHMENT # STREET ADDRESS CITY-\$1-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME 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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: