2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

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FILED -- SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # A05000002271 08 MAR 12 AM 8: 39 PIAZZA CHILDREN INVESTMENTS, LTD. Principal Place of Business Mailing Address 13777 BELCHER ROAD SOUTH 13777 BELCHER ROAD SOUTH LARGO, FL 33771 LARGO, FL 33771 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01222008 CR2E003 (12/06) Chg-LP 4. FEI Number Applied For City & State City & State 20-3995819 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARNETT, LESLIE J Street Address (P.O. Box Number is Not Acceptable) 601 BAYSHORE BOULEVARD, SUITE 700 TAMPA, FL 33606 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. DATE 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 ADDRESS CHANGES ONLY 12. 13. DOCUMENT # STREET ADDRESS NAME PIAZZA FAMILY OPERATING PARTNERS, LLC 03/5/708-01/96-01/964 ***\$00.00 STREET ADDRESS 13777 BELCHER ROAD SOUTH CITY+ST-ZIP CITY-ST-ZIP LARGO, FL 33771 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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

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