2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A06000001321

1. Entity Name
CALEDON HOLDINGS LP

FILED

2007 APR 30 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
C/O HODGSON RUSS LLP, ATTN: ARNOLD ZIPPER 1801 N. MILITARY TRAIL, SUITE 200 BOCA RATON, FL 33431	C/O HODGSON RUSS LLP, ATTN: ARNOLD ZIPPER 1801 N. MILITARY TRAIL, SUITE 200 BOCA RATON, FL 33431

01292007 Chg-LP CR2E003 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-8035357 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301	Name: HRAWG CORP. Street Address (P.O. Box Number is Not Acceptable): 1801 N. Military Trail, Ste. 200 City: Boca Raton FL Zip Code: 33431

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 _____ By: James M. Hankins, VP DATE

Signature, typed 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	L06000057603	STREET ADDRESS	
NAME	CORAL FINANCIAL PARTNERS, L.C.	CITY-ST-ZIP	
STREET ADDRESS	1801 N. MILITARY TRAIL, SUITE 200		
CITY-ST-ZIP	BOCA RATON, FL 33431		
DOCUMENT #		STREET ADDRESS	
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STAPLE CHECK HERE

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.

By: Coral Financial Partners, L.C., its GP; By: Orsino Investments, L.P., its Member; By: 2097865 Ontario, Inc., its GP

SIGNATURE: _____ By: Philip Orsino, President 4/26/07 4165816676

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #