


**2008 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By September 12, 2008**

<b>DOCUMENT # A09181</b>		
1. Entity Name KALAMAZOO ASSOCIATES, LTD.		

**FILED  
Jul 16, 2008 08:00 AM  
Secretary of State**

Principal Place of Business 230 S BROAD STREET MEZZANINE PHILADELPHIA, PA 19102	Mailing Address 230 S BROAD STREET MEZZANINE PHILADELPHIA, PA 19102
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07072008 No Chg-LP      CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-3034443	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

REGISTERED AGENTS LEGAL SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301

**DO NOT WRITE  
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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$900.00  
On or after September 12, 2008, Fee will be \$1000.00**

**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 #	A93000001120
NAME	BUSTER BOYNTON BEACH ASSOCIATES, L.P.
STREET ADDRESS	230 SOUTH BROAD STREET
CITY-ST-ZIP	PHILADELPHIA, PA
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000955147  
07/16/08-80005-006 900.00

**DO NOT WRITE  
IN THIS SPACE**

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

**SIGNATURE:**  EDWARD L. PINES PRES BUSTER LLC 7/16/08

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