

**2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2008**

DOCUMENT # A19547		
1. Entity Name PALM SPRINGS MILE ASSOCIATES, LTD.		

FILED

08 APR 21 PM 3:54

SECRETARY OF STATE



Principal Place of Business % PHILIPS INTERNATIONAL HOLDING CORP. 295 MADISON AVE, 2ND FLOOR NEW YORK NY 10017	Mailing Address % PHILIPS INTERNATIONAL HOLDING CORP. 295 MADISON AVE, 2ND FLOOR NEW YORK NY 10017
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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

1st MOORE CR2E003 (10/07)

4. FEI Number 58-1609315	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

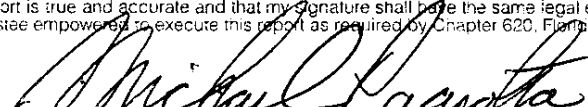
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	DATE
000123956530 04/18/08--01006--012 **500.00	

FILE NOW!!! Fee is \$500. * After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 #	M00000000829	STREET ADDRESS	
NAME	SL FLORIDA LLC	CITY-ST-ZIP	
STREET ADDRESS	295 MADISON AVE, 2ND FLOOR		
CITY-ST-ZIP	NEW YORK NY 10017		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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; I am the owner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.	
SIGNATURE: 	DATE: 4/9/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	
Michael N. Pagnotta Senior Vice President Philips International Holding Corp. As Agent Palm Springs Mile Assoc.	

STAPLE CHECK HERE