## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

## FILED Jan 15, 2008 08:00 All Secretary of State

Due By May 1, 2008				Jan 15, 2008 08:	
DOCUMENT # A31005  1. Entity Name EAST-TOWN SHOPPING CENTER, LIMITED					Secretary of S
850 N.E. 5T	ce of Business TH AVENUE N, FL 33432	Mailing Address 850 N.E. 5TH AVENUE BOCA RATON, FL 33432			120 AZBIT DIAK BIAK ANDI AKDIT AKDITAK BI ABU
DO NOT WRITE IN THIS SPACE  6. Name and Address of Current Registered Agent				01092008 No Chg-LP  4. FEI Number 95-6420843  5. Certificate of Status Desired	CR2E003 (12/06)  Applied For Not Applicable  \$8.75 Additional Fee Required
		rrent Registered Agent	DO NOT WRITE IN THIS SPACE		
8. The above named entity submits this statement for the purpose of changing its registered office or registe the obligations of registered agent.  SIGNATURE   Signature, typed or printed name of registered agent and late if applicable.  FILE NOW!!! FEE IS \$500.00  After May 1, 2008, Fee will be \$900.00				ed agent, or both, in the State of F	orida. I am familiar with, and accept
	A GENERAL PARTN	ER THAT IS A BUSINESS ENTIT'S MAY NOT be changed on the fo	Y MUST BE REGIST	ERED AND ACTIVE WITH TI t must be filed to change a g	HIS OFFICE.
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	GENERAL PAR MUIR, ROBERT C. 850 N.E. 5TH AVENUE BOCA RATON, FL 33432	TNER INFORMATION		1/000000 01/16/08 , DO NOT WI IN THIS SP	
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; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as features. Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPES OR PROTED NAME OF SIGNING PENERAL PARTIER

Date

Daylime Phone #