FILED 2008 LIMITED PARTNERSHIP ANNUAL REPORT Mar 13, 2008 08:00 AN Secretary of State Due By May 1, 2008 DOCUMENT # A96000001045 NASSAU BAY LIMITED PARTNERSHIP Mailing Address Principal Place of Business 1312 LAUREL POINT CIRCLE 1312 LAUREL POINT CIRCLE HARRISBURG, PA 17110 HARRISBURG, PA 17110 01202008 No Chg-LP CR2E003 (12/06) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 25-1789626 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CARMICHAEL, KEVIN ESQUIRE DO NOT WRITE 19495 BISCAYNE BLVD., SUITE 606 AVENTURA, FL 33180 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. DATE Signature Typed or printed name of registered agent and little it apolicable 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 12. GP9600000328 DOCUMENT # STREET ADDRESS 2525 NORTH SEVENTH STREET CITY - ST- ZIP HARRISBURG, PA 17110 000000857928 04/01/08-80023-018 500.00 DOCUMENT # NAME SCHWAB, ISRAEL 1312 LAUREL POINT CIRCLE . STREET ADDRESS CITY-ST-ZIP HARRISBURG, PA 17110 DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY - ST - ZIP IN THIS SPACE DOCUMENT # STREET ADDRESS CITY - ST- ZIP DOCUMENT

14. I hereby certify that the information supplied with this filling 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 came 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. Furtida Statutes.

SIGNATURE:

STREET ADDRESS
CITY-ST-ZIP
DOCUMENT *
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/10/08

Qaytime Prone