2007 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2007**

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SIGNATURE: 64

SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # B02000000438 07 FEB 12 AM 9: 28 TAMPA BAY GROUND LEASE LIMITED PARTNERSHIP Principal Place of Business Mailing Address 270 COMMERCE DRIVE 270 COMMERCE DRIVE ROCHESTER, NY 14623 ROCHESTER, NY 14623 2. Principal Place of Business - No PO Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 Chg-LP CR2E003 (12/06) Applied For City & State City & State 4. FEI Number 74-3073516 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) €1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FI 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 Signature, typed or printed name of registered agent and title if applicable DATE 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. GENERAL PARTNER INFORMATION 12. F02000006458 DOCUMENT ₹ STREET ADDRESS TAMPA BAY GROUND LEASE GENERAL PARTNER COR CORPORATION STREET ADDRESS 270 COMMERCE DRIVE CITY-ST-ZIP CITY-ST-ZIP ROCHESTER, NY 14623 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS City-St-ZIP CITY-ST-ZIP 400088446294 02/15/07--01030-004 **500.00 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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; 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

Tampa Say Ground Lease General Partner Corporation

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER WILLIAM SOMETICKETY VICE PRESIDENT