2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # B9700000430 08 MAY -7 PM 1:52 SHORES AT GULF HARBOUR LIMITED PARTNERSHIP Principal Place of Business Mailing Address 3185 HORSESHOE DRIVE SOUTH, 1ST FLOOR 3185 HORSESHOE DRIVE SOUTH, 1ST FLOOR NAPLES, FL 34104 NAPLES, FL 34104 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04292008 CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 59-3489305 Not Applicable Zip Country Country Zip \$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 WELKS KAREN BLOOM, KEN E Street Address (P.O. Box Number is Not Acceptable) 3185 HORSESHOE DRIVE 3185 HÓRSESHOE DRIVE SOUTH, 1ST FLOOR NAPLES, FL 34104 NAPLES 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 registe/ed agent. 000128679330 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. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT # P96000072214 STREET ADDRESS RONTO DEVELOPMENTS OF FORT MYERS, INC. NAME STREET ADDRESS 3185 HORSESHOE DRIVE SOUTH, 1ST FLOOR CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL 34104 M97000000477 DOCUMENT # STREET ADDRESS NAME WESTBROOK SHORES AT GULF HARBOUR, L.L.C. STREET ADDRESS 599 LEXINGTON AVENUE, STE. 3800 CITY-ST-7IP CITY-ST-ZIP NEW YORK, NY 10022 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS 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 OF H. Mulcon.