SEC Form 3

FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

OMB APPROVAL

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					estiment Company Act of 194	-					
1. Name and Address of Reporting Person* HOOTKIN PAMELA N		Date of Event Retatement (Month/I 6/17/2008		3. Issuer Name and Ticker or Trading Symbol <u>CEDAR SHOPPING CENTERS INC</u> [ CDR ]							
(Last) (First)	(Middle)			4. Relationship of Reporting Person( (Check all applicable)		(s) to Issuer		<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> </ul>			
44 SOUTH BAYLES AVENUE				X	Director Officer (give title	10% Owne Other (spe					
(Street) PORT WASHINGTON	11050				below)	below)		X	X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					0	D					
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)											
Expirati (Month/ Date		Expiration Da	Date Exercisable and piration Date lonth/Day/Year)		3. Title and Amount of Securities Derivative Security (Instr. 4)		4. Conve or Exe	ersion ercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Expiration Date	n Title		Amount or Number of Shares	nber		Indirect (I) (Instr. 5)		
Explanation of Responses:											

Remarks:

/s/ Pamela N. Hootkin \*\* Signature of Reporting Person

Date

06/17/2008

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.