

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038767

FILED
Apr 20, 2007
Secretary of State

Entity Name: EDMARK PROPERTIES, LLC

Current Principal Place of Business:

2662 N. MCMULLEN BOOTH ROAD
STE # 434
CLEARWATER, FL 33761 PI

New Principal Place of Business:

2662 N. MCMULLEN BOOTH ROAD
STE # 434
CLEARWATER, FL 33761 US

Current Mailing Address:

2662 MCMULLEN BOOTH ROAD
STE # 434
CLEARWATER, FL 33761 PI

New Mailing Address:

2662 MCMULLEN BOOTH ROAD
STE # 434
CLEARWATER, FL 33761 US

FEI Number: 20-4723919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONROY, J. THOMAS III
2210 VANDERBILT BEACH ROAD
STE # 1201
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FINKELSTEIN, EDWARD S
Address: 2662 N. MCMULLEN BOOTH ROAD # 434
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM () Delete
Name: FINKELSTEIN, MARK D
Address: 2662 N. MCMULLEN BOOTH ROAD #434
City-St-Zip: CLEARWATER, FL 33761 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EDWARD S. FINKELSTEIN

MGRM

04/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date