I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: N. KEITH MCKEY

CHIEF FINANCIAL OFFICER 04/15/2016

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000001517

Entity Name: EASTGROUP PROPERTY SERVICES OF FLORIDA, LLC

Current Principal Place of Business:

190 EAST CAPITOL STREET SUITE 400 JACKSON, MS 39201

Current Mailing Address:

190 EAST CAPITOL STREET SUITE 400 JACKSON, MS 39201

FEI Number: 64-0907356

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

Authorized Person(s) Detail :

City-State-Zip: JACKSON MS 39201

Title	MGR	Title	MGR/
Name	HOSTER, DAVID HII	Name	MCKEY, N. KEITH
Address City-State-Zip:	400	Address	190 E. CAPITOL ST., STE 400
		City-State-Zip:	JACKSON MS 39201
Title	CAA		
Name	CORKERN, BRUCE		
Address	190 E. CAPITOL STREET, SUITE 400		

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 15, 2016 Secretary of State CC5863092583

Date

Certificate of Status Desired: No

Date