


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000000692


1. Entity Name
 EJ FLORIDA PROPERTY MANAGEMENT, LLC



Principal Place of Business
 C/O FOWLER, WHITE
 501 E. KENNEDY BLVD., STE. 1700
 TAMPA, FL 33602

Mailing Address
 11401 ROOSEVELT BLVD.
 PHILADELPHIA, PA 19154

DO NOT WRITE IN THIS SPACE



02232005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3691347	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HUMPHRIES, J. BOB
 501 E. KENNEDY BLVD., STE. 1700
 TAMPA, FL 33602

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P REILLY, JOHN H III 11401 ROOSEVELT BLVD. PHILADELPHIA, PA 19154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST REILLY, ELIZABETH 11401 ROOSEVELT BLVD. PHILADELPHIA, PA 19154
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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: Joseph Burt TAX Analyst - 02/28/05 (215)602-8209

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #