

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006 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



03312006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3691347 Applied For: Not Applicable
 5. Certificate of Status Desired: \$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, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	REILLY, JOHN H III
STREET ADDRESS	11401 ROOSEVELT BLVD.
CITY-ST-ZIP	PHILADELPHIA, PA 19154
TITLE	ST
NAME	REILLY, ELIZABETH
STREET ADDRESS	11401 ROOSEVELT BLVD.
CITY-ST-ZIP	PHILADELPHIA, PA 19154
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 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: [Signature] Tax Manager Date: 4-17-06 (215) 602-8209
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #