

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007851

FILED  
Mar 06, 2007  
Secretary of State

Entity Name: EGE PROPERTIES, L.L.C.

## Current Principal Place of Business:

4727 ASHTON RD.  
SARASOTA, FL 34233

## New Principal Place of Business:

4727 ASHTON ROAD  
SARASOTA, FL 34233 US

## Current Mailing Address:

4727 ASHTON RD.  
SARASOTA, FL 34233

## New Mailing Address:

P O BOX 20624  
SARASOTA, FL 34276 US

FEI Number: 65-1110695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ, ALBERT A JR.  
1133 FOURTH ST., STE. 300  
SARASOTA, FL 34236 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: ERVIN, LISA C  
Address: 4227 ASHTON ROAD  
City-St-Zip: SARASOTA, FL 34233

Title: MGRM ( ) Delete  
Name: ERVIN, STEVEN C  
Address: 4227 ASHTON ROAD  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ERVIN, LISA C  
Address: PO BOX 20624  
City-St-Zip: SARASOTA, FL 34276 US

Title: MGRM (X) Change ( ) Addition  
Name: ERVIN, STEVEN C  
Address: PO BOX 20624  
City-St-Zip: SARASOTA, FL 34276 US

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: LISA C ERVIN

MMR

03/06/2007

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