


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 12, 2007 08:00 A**  
**Secretary of State**

|  |   |
|--|---|
| DOCUMENT # L03000035406<br>1. Entity Name<br>SPG EQUITY, LLC |  |
|--|---|

|   |   |
|---|---|
| Principal Place of Business<br>2300 GLADES RD., STE. 100E<br>BOCA RATON, FL 33431 | Mailing Address<br>2300 GLADES RD., STE. 100E<br>BOCA RATON, FL 33431 |
|---|---|



**DO NOT WRITE IN THIS SPACE**

02052007No Chg-LLC      CR2E083 (11/05)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br>76-0741369                               | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

GREENFIELD, WILLIAM R  
2300 GLADES RD., STE. 100E  
BOCA RATON, FL 33431

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00 Due by May 1, 2007**

| 9. MANAGING MEMBERS/MANAGERS                   |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>GREENFIELD, WILLIAM R<br>2300 GLADES RD., SUITE 100E<br>BOCA RATON, FL 33431 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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03/21/07-80015-010 50.00

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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: William R. Greenfield      2/15/07      561-392-6662  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #