2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2008
Secretary of State

DOCUMENT# L03000042435

Entity Name: EQUITY PROPERTY MANAGEMENT, LLC

Current Principal Place of Business:

6361 PRESIDENTIAL COURT
SUITE 101
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

6361 PRESIDENTIAL COURT
SUITE 101
FT. MYERS, FL 33919

New Mailing Address:

FEI Number: 74-3107808 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CAMDEN, TOM
1910 VIRGINA AVE., 802-B
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

CAMDEN, TOM
6361 PRESIDENTIAL CT, #101
FT. MYERS, FL 33919 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: _____ 06/30/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CAMDEN, TOM
Address: 1910 VIRGINA AVE., 802-B
City-St-Zip: FT. MYERS, FL 33901

Title: S (X) Delete
Name: HUSCHMAN, MICHAEL
Address: 6361 PRESIDENTIAL COURT
City-St-Zip: FT. MYERS, FL 33919

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CAMDEN, TOM
Address: 6361 PRESIDENTIAL CT, #101
City-St-Zip: FT. MYERS, FL 33919

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TOM CAMDEN MGR 06/30/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date