

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044609

Entity Name: EDGEWOOD PLAZA, LLC

FILED
Jan 05, 2006
Secretary of State

Current Principal Place of Business:

1925 E. EDGEWOOD DRIVE
SUITE 100
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

1925 E. EDGEWOOD DRIVE
SUITE 100
LAKELAND, FL 33803

New Mailing Address:

FEI Number: 04-3780019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEAR, CHRISTOPHER M
ONE LAKE MORTON DR.
LAKELAND, FL 33801 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: MGR () Delete
Name: LM PROPERTIES OF POL, K COUNTY, INC.
Address: 1925 E. EDGEWOOD DRIVE SUITE 100
City-St-Zip: LAKELAND, FL 33803

Title: MGR () Delete
Name: MARCOBAY PROPERTIES,, INC.
Address: 500 S. FLORIDA AVENUE SUITE 210
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MASTERS, GREGORY A MGR
Address: 1925 E. EDGEWOOD DRIVE SUITE 100
City-St-Zip: LAKELAND, FL 33803

Title: MGR (X) Change () Addition
Name: BAYLESS, HOWARD D MGR
Address: 500 S. FLORIDA AVENUE SUITE 210
City-St-Zip: LAKELAND, FL 33801

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: GREGORY A. MASTERS

MGR

01/05/2006

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