

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044694

FILED
Apr 26, 2007
Secretary of State

Entity Name: E.D. PROPERTY MANAGEMENT, "LLC"

Current Principal Place of Business:

5058 GROBE ST.
NORTH PORT, FL 34287

New Principal Place of Business:

11963 CORTEZ LN
NORTH PORT, FL 34287

Current Mailing Address:

5058 GROBE ST.
NORTH PORT, FL 34287

New Mailing Address:

11963 CORTEZ LN
NORTH PORT, FL 34287

FEI Number: 56-2417852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLUN, ANNA MGR
5058 GROBE ST..
NORTH PORT, FL 34287 US

Name and Address of New Registered Agent:

KAPLUN, ANNA MGR
11963 CORTEZ LN
NORTH PORT, FL 34287 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: ANNA KAPLUN

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KAPLUN, ANNA MGR
Address: 5058 GROBR ST.
City-St-Zip: NORTH PORT, FL 34287 SA

Title: MGR () Delete
Name: KAPLUN, LAZAR
Address: 5058 GROBE ST.
City-St-Zip: NORTH PORT, FL 34287 SA

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KAPLUN, ANNA MGR
Address: 11963 CORTEZ LN
City-St-Zip: NORTH PORT, FL 34287 SA

Title: MGR (X) Change () Addition
Name: KAPLUN, LAZAR
Address: 11963 CORTEZ LN
City-St-Zip: NORTH PORT, FL 34287 SA

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: ANNA KAPLUN

MNGR

04/26/2007

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