2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 21, 2008
Secretary of State

DOCUMENT# L07000071116

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

Current Principal Place of Business:

10343 CO. HWY. 30-A PLACE
UNIT #222 BUILDING D-VILLAGE OF SO. WALTON
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

317 WINDSOR DRIVE
BIRMINGHAM, AL 35209

New Mailing Address:

FEI Number: 26-0685373 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

CHASE, NINA
3567 E. CO. HWY. 30-A
FIRST FLOOR
SEAGROVE BEACH, FL 32459 US

Name and Address of New Registered Agent:

CHASE, NINA
54 LOGAN LANE
174 WATER COLOR WAY BOX 299
GAYTON BEACH, FL 32459 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: _____ 07/21/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MYER, JON P
Address: 317 WINDSOR DRIVE
City-St-Zip: BIRMINGHAM, AL 35209

Title: MGRM ( ) Delete
Name: MYER, REBA C
Address: 317 WINDSOR DRIVE
City-St-Zip: BIRMINGHAM, AL 35209

ADDITIONS/CHANGES:

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

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: JON P MYER MGRM 07/21/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date