2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000069233

Entity Name: ELLIOTT PROPERTY MANAGEMENT, INC.

FILED Feb 13, 2012 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|---|--------------------------------|------------------------------------|--|
| | PYS DRIVE SSEE, FL 32303 | US | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | PYS DRIVE SSEE, FL 32303 | US | | |
| FEI Number: | 59-3275967 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and Address of Current Registered Agent: Name and Address of New Reg | | | | New Registered Agent: |
| | AURA L PYS DRIVE SSEE, FL 32303 | US | | |
| The above in the State | named entity sub e of Florida. | omits this statement for the p | ourpose of changing its registered | I office or registered agent, or both, |
| SIGNATUR | RE: | | | |
| | Electronic | Signature of Registered Age | ent | Date |
| OFFICERS | S AND DIRECTO | DRS: | | |
| Title: Name: Address: City-St-Zip: | S PHIPPS, GAVIN 4300 MERIDIAN R TALLAHASSEE, F | | | |
| Title: | VP | | | |

Title: P

City-St-Zip:

Name: Address:

PHIPPS, IAN

4300 MERIDIAN RD TALLAHASSEE, FL 32312

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA PHIPPS P 02/13/2012