
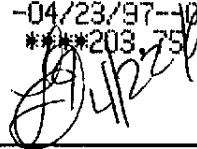
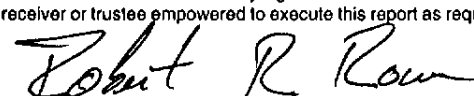


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 APR 17 AM 10:12 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company HPG, I.C. 5341 SW 91ST TERR STE A GAINESVILLE FL 32608		DOCUMENT #L92000000062			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip		3. Date Organized or Qualified 12/15/1992	
3a. State of Formation FL		4. FEI Number 59-3159082		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Date of Last Report 03/28/1996	
6. Certificate of Status Desired <input type="checkbox"/> \$6.75 Additional Fee Required		7. Name and Address of Current Registered Agent HAILE PLANT. MAN., 9905 SW 44TH AVE. GAINESVILLE FL 32608			
8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code		9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when re-registering)</small>		DATE _____			
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
M	PLAYER, GARY	ONE ERIEVIEW PLAZA		CLEVELAND OH	
M	MILLAR, WAYNE	5341 SW 91ST. TERR.		GAINESVILLE FL	
M	BLOUNT, CHARLES L	423 S.W. 93RD ST		GAINESVILLE FL	
M	ROWE, ROBERT R	5341 SW 91ST. TERR		GAINESVILLE FL	
M	HAILE PLANT. MANA.	3030 IBJ FREEWAY STE. 350		DALLAS TX	
300002152103--1 -04/23/97-101074--015 ****203.75****203.75 					
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: 		Date: 4-15-97			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>		<small>Daytime Phone #</small>	