File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 10 A20 28 FH 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address DOCUMENT # L9400000458
of Limited Liability Company WEBER FLORIDA'S BEST BEACH INVEST 1a. Principal Place of Business Address MENT COMPANY, L.C. 5401 S. KIRKMAN ROAD 5401 S. KIRKMAN ROAD SUITE 500 SUITE 500 ORLANDO FL 32819 ORLANDO FL 32819 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 09/09/1994 FΙ. 5301 Conroy Road Suite, Apt. #, etc. 5301 Conroy Rd. 4. FEI Number Applied For Suite 140 City & State Suite 140 59-3291196 Not Applicable Orlando, FL 5. Date of Last Report Orlando, FL Country 6. Certificate of Status Desired Country S8 75 Additional Fee Required 03/23/1998 USA 32811 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office LANE, PAUL C Lane, Paul C Streel Address (P.O. Box Number is Not Acceptable) 5401 S. KIRKMAN ROAD SUMPE 500 5301 Conroy Road ORLANDO FL 32819 Suite, Apt. #, etc. <u>Suite 140</u> Zip Code 32811 Orlando 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 (Registered Agent Accepting Appointment)—(NOTE_Registered Agent signature required when reinstalling) City, State and Zip Code **Business Street Address** 10. Title Managing Members/Managers 5401 S. KIRKMAN ROAD, SUIT ORLANDO FL MGRM GAERTNER, JOHANN 5401 S. KIRKMAN ROAD, SUIT ORLANDO FL NEBER, ANDREA MGKM MGR. LANE, PAUL C 5401 S. KIRKMAN ROAD, SUIT ORLANDO FL **please change business \$treet address as noted above, i.e. 5301 Cohroy Rd., Suite 140 Orlando, FL 32811 11. Ido 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 empowared to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an

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attachment with an address SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER