

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company DURANGO RESOURCES, L.C. 502 NW 75TH STREET SUITE 77 GAINESVILLE FL 32607-1799	DOCUMENT # L94000000476
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FILED

99 MAY 17 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address
 502 NW 75TH STREET
 SUITE 77
 GAINESVILLE FL 32607

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		09/16/1994	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
58-2153902				5. Date of Last Report	6. Certificate of Status Desired
05/04/1998				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	<input type="checkbox"/>

7. Name and Address of Current Registered Agent BAILY, JAY E 46 N. WASHINGTON BLVD. SUITE 13 SARASOTA FL 34236

8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City <div style="text-align: right;">FL</div> 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 _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when appointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	PHILLIPS, JOSEPH C Donald R. Holcomb	502 N.W. 75TH ST. STE. 77	GAINESVILLE FL
MEM			

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 ****188.75 ****188.75

5-18-99

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. 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: Donald R. Holcomb
SIGNATURE ALSO TYPED OR PRINTED IN NAME OF SIGNER'S MANAGER OR MEMBER FROM MANAGER'S