

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

APPROVED
AND
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97 MAY -1 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
\$ 203.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company LOST CLASSICS BOOK COMPANY L.C. P.O. BOX 3429 LAKE WALES FL 33859-3429	DOCUMENT #L96000001044
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1a. Principal Place of Business Address C/O GEORGE D. O'NEILL, JR. MOUNTAIN LAKE LAKE WALES FL 33859

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2 Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

3. Date Organized or Qualified	3b. State of Formation
10/02/1996	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
59-3404020	
5. Date of Last Report	6. Certificate of Status Desired
	SB 75: Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent ROSENBERG, DONALD S ONE SE THIRD AVENUE SUITE 2600 MIAMI FL 33131	8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL
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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 re-nating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MEM	O'NEILL, GEORGE D JR	MOUNTAIN LAKE	LAKE WALES FL
MEM	O'NEILL, GEORGE D	30 ROCKEFELLER PLAZA RM. 5	NEW YORK NY

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 *****203.75 *****203.75
D. Alan
 5/1/97

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: *[Signature]* **4-30-97**

Date Daytime Phone #