File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998

as registered agent, and accept the obligations.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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 of Limited Liability Company

DOCUMENT # 1.9700000028

L97000000028

THE BOY'S MOOSE LIMITED COMPANY 2340 PERIWINKLE WAY

FILED 98 MAR 20 PH 12: 00

SECH PA DO STATE TALLAMASDIE, FLORIDA

1a. Principal Place of Business Address

2340 PERIWINKLE WAY

SUITE J-3 SANIBEL ISLAND FL 33957				SUITE J-3 SANIBEL ISLAND FL 33957	
2. Principal Place of Business		2a. Malling A	ddress	3. Date Organized or Qualified 3a. State of Formation	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		01/07/1997 FI. 4. FEI Number Applied For	
City & State		City & State		65-0731444 Not Applicable	
Zip	Country	Zip	Country	5. Date of Last Report 6. Certificate of Status Desired 8. Certificate of Status Desired 8. Certificate of Status Desired	
7. Name and Address of Current Registered Agent			nt	8. Name and Address of New Registered Agent/Office	
RATLIFF, ROBERT LEE III 2340 PERIWINKLE WAY SUITE J-3				Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.	
	n ISLAND FL 3		C	10002457021	

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

DATE _ SIGNATURE_ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR BERG, MICHAEL 2340 PERIWINKLE WAY SUITE SANIBEL ISLAND FL 2340 PERIWINKLE WAY SUITE MGR REINSDORF, STEFAN SANIBEL ISLAND FL 2340 Preciniable Way, Suit Radiff, Robert Cee II Saribel Island, FZ Men

11. Ido hereby certify that the information supplied with this filling 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: