File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY & Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 JUL - 1 AM 9:00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L9700000178 1a. Principal Place of Business Address DOUGLAS ENTERPRISES INTERNATIONAL, LLC 1257 E BAYA AVE 1257 E BAYA AVE LAKE CITY FL 32055 LAKE CITY FL 32055 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 86 N 5T# t same 02/13/1997 Suite, Apt. #, etc. Applied For 59-3418015 City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country S8-75-Additional Fee Hequired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name COLEMAN, C. RANDOLPH Street Address (P.O. Box Number Is Not Acceptable) 9250 BAYMEADOWS RD SUITE 230 Suite, Apt. #, etc. JACKSONVILLE FL 32256 City 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 aignature required when reinstating) Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title MEM DOUGLAS, HERBERT M 1257 E BAYA AVE LAKE CITY FL MEM DOUGLAS, DIANA S 1257 E BAYA AVE LAKE CITY FL 40 00025.845.34-- 4 -07/03/38--01066--002 ****188.75 ****188.75

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 ocmpany 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

Daytime Phone #

attachment with an address.

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