


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		FILED APR 26 PM 5:00 SHIRLEY STATE 1999	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company SPECIALTY MARINE GROUP, L.C. 1416 INTREPID DRIVE DELAND FL 32724				DOCUMENT # L98000002711			
2 Principal Place of Business 5797-C LAKE WINONA RD Suite, Apt. #, etc.				2a. Mailing Address P.O. Box 549 Suite, Apt. #, etc.			
City & State DeLeon Springs, FL Zip 32130 Country USA		City & State DeLeon Springs, FL Zip 32130 Country USA		3. Date Organized or Qualified 11/16/1998		3a. State of Formation FL	
				4. FEI Number 593543080		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent SHIRLEY, MIKE 1416 INTREPID DRIVE DELAND FL 32724				8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 5797-C LAKE WINONA RD Suite, Apt. #, etc. City DeLeon Springs FL Zip Code 32130			
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: <i>Michael R. Shirley</i> DATE: 4-23-99 <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when in state of FL)</small>							
10. Title	Managing Members/Managers		Business Street Address		City, State and Zip Code		
MGR	SHIRLEY, ROB		5797-C LAKE WINONA RD 1416 INTREPID DRIVE		DeLeon Springs FL DELAND FL 32130		
MGR	SHIRLEY, MIKE		5797-C LAKE WINONA RD 1416 INTREPID DRIVE		DeLeon Springs FL DELAND FL 32130		
MGR	MAHLER, GARY		5797-C LAKE WINONA RD 1416 INTREPID DRIVE		DeLeon Springs FL DELAND FL 32130		
MGR	LAPoint, KRIS		5797 LAKE WINONA RD.		DeLeon Springs FL 32130		
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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: <i>Michael R. Shirley</i> MGR MIKE SHIRLEY 4-23-99 904 985-2502 <small>SIGNATURE AND TYPE OR PRINTED NAME OF GROUP, MANAGER, MEMBER OR EMPLOYEE</small> <small>Date</small> <small>Digitized Blank #</small>							