
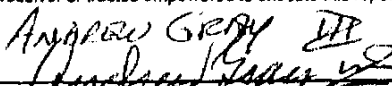


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 MAR 27 AM 9:50 SECRETARY OF STATE TALLAHASSEE FLORIDA	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L93000000283 A & J INVESTMENTS AND CONSULTING, L.C. 4191 MADURA RD. 1408 CHAMPIONS GREEN DR. GULF BREEZE FL 32561		1a. Principal Place of Business Address 4191 MADURA RD. 1408 CHAMPIONS GREEN DR. GULF BREEZE FL 32561			
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.					
2. Principal Place of Business 1408 CHAMPIONS GREEN DR. Suite, Apt. #, etc.		2a. Mailing Address JAME		3. Date Organized or Qualified 08/26/1993	
City & State GULF BREEZE FL		City & State		3a. State of Formation FL	
Zip 32561		Country USA		4. FEI Number 62-1546016	
7. Name and Address of Current Registered Agent GRAY, ANDREW III 4191 MADURA ROAD GULF BREEZE FL 32561		5. Date of Last Report 06/17/1996			
8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1408 CHAMPIONS GREEN DR. Suite, Apt. #, etc. City GULF BREEZE FL Zip Code 32561		6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 8. Certificate of Status Desired <input type="checkbox"/> Additional Fee Requested			
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MEM	GRAY, ANDREW III	1408 CHAMPIONS GREEN DR. 4191 MADURA RD.		GULF BREEZE FL	
MEM	GRAY, JACQUELINE D	4191 MADURA RD. 1408 CHAMPIONS GREEN DR.		GULF BREEZE FL	
400002127114--9 -03/28/97--01005--002 ***203.75 ***203.75					
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: 		904- 2-24-97 932-0883 Date Daytime Phone #			