


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 99 FEB 22 AM 8: 58 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 DOCUMENT # 193000000420 TOTAL GOLF CONSTRUCTION, L.C. P.O. BOX 903 VERO BEACH FL 32961		1a. Principal Place of Business Address 946 OLD DIXIE HWY. VERO BEACH FL 32960			
2. Principal Place of Business 4045 43rd Avenue Suite, Apt. #, etc.		2a. Mailing Address 4045 43rd Avenue Suite, Apt. #, etc.		3. Date Organized or Qualified 12/01/1993	
City & State Vero Beach, FL Zip 32960		City & State Vero Beach, FL Zip 32960		3a. State of Formation FL	
Country USA		Country USA		4. FEI Number 59-3235136 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 03/11/1998		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent GREENSPOON, GERALD 100 W CYPRESS CREEK RD SUITE 700 FT LAUDERDALE FL 33309			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City 0000002789340-3 -02/26/99-01111-017 ****188.75 ****188.75 FL		
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) (If Not, Registered Agent signature required when new filing)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MEM	TRENARY, LARRY	1609 ROCKLEDGE DR.		ROCKLEDGE FL	
MEM	GAWNE, RICHARD	2780 TRANSTIDE DR.		NANOOSE BAY BC	
MEM	BREWSTER, R. JEFF	3515 6TH PL. SW		VERO BEACH FL	
SL-25-99					
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: _____		Jeff Brewster		2/18/99 561 562 1177	