
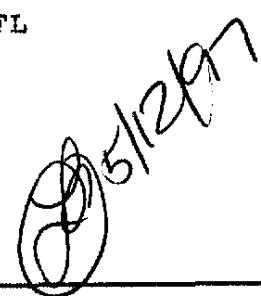


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
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 # L94000000019			
H, H, K ASSOCIATES, L.C. 8052 ARMSTRONG ROAD MILTON FL 32583		1a. Principal Place of Business Address 8052 ARMSTRONG ROAD MILTON FL 32583			
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.					
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/09/1993	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country	Zip	Country	5. Date of Last Report
					02/07/1996
7. Name and Address of Current Registered Agent			8. Name and Address of New Registered Agent		
HENRY, THOMAS W 8052 ARMSTRONG ROAD MILTON FL 32583			Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 500002178255 -05/14/97--01068--019 City ****203.75 ****203.75 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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>			DATE _____		
10. Title	Managing Members/Managers		Business Street Address		City, State and Zip Code
MGRM	HENRY, THOMAS W		8052 ARMSTRONG ROAD		MILTON FL
MGRM	HENRY, DONALD G		8052 ARMSTRONG ROAD		MILTON FL
MGRM	KENNEDY, ARLENE		8052 ARMSTRONG ROAD		MILTON FL
MGRM	GOODRICH, EDWARD		8052 ARMSTRONG ROAD		MILTON FL
					
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. 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>Thomas W. Henry</i>			THOMAS W. HENRY 4.28.97		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			Date	Daytime Phone #	

FILED
 97 MAY -1 PM 1:55
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA