2 nd and File on or before Sept. 30, 1998 or Limited Liability Company will be FINAL NOTICE: dissolved, if dissolved, minimum amount due to reinstate: \$688.75										
LIMITE	LORIDA DEPARTMENT OF STATE Sandra B. Mortham			FILED						
	ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS						98 OCT -5 PM 4: 30			
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L9400000243										
JARAMAR CONSTRUCTION COMPANY, L.C. 10370 RICHMOND SUITE 900 HOUSTON TX 77042						1a. Principal Place of Business Address 13891 JETPORT LOOP SUITE 9 FT. MYERS FL 33913				
2 Principal Place of Business 2a. Mail			ing Address			3. Date Organized or Qualified 3a. State of Formation				
Suite, Apt. #, etc. Suite, Apr			M. #, etc.			06/02/1 4. FEI Number	994	FL		
City & State City & Sta			ato			Applied For Not Applicable				
7 ip	Country	Zip		Count		5. Date of Last F		6. Certific	ate of Status Desired	
) Zilp	Country	Zip		Count	ıy	04/18/1	997	SB.75 Add	honal Fee Flequired	
	7. Name and Address of Current	Agent						t/Office		
LEFF: 1389: SUIT: FT.	Street Address (P.O. Box Nui Sulte, Apl. #, etc.				-10/08/3801103003 -10/08/3801103003 					
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.									e purpose of changing coept the appointment	
SIGNATURE DATE (16 systems) Area LAccepting Appointment) (NOTE Registered Agent signature required when reinstating)										
10. Title	Managing Members/Manager	Business Street Address				City, State and Zip Code				
MGR	MCARTHUR, J O	10370 RICHMOND, SUITE 900			UITE 900	HOUSTON TX				
MGR	LEFFLER, WALTER R	13891 JETPORT LOOP, SUITE			FT. MYERS FL					
P/M	LEFFLER, WALTER R	13891 JETPORT LOOP, SUITE			, SUITE	FT. MYERS FL				
MEM	JARAMAR, LTD	10370 RICHMOND, SUITE 900			ITE 900	HOUSTON TX				
•							O	10	1	

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:

J. Michael Sadler, Executive Vice President & Manager

SIGNATURE:

Daylete Pront #

Daylete Pront #