


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 98 APR 22 AM 11:31 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 # L94000000298 ENGLEWOOD GARDENS APARTMENTS, LIMITED COMPANY 380 KLUGE DR. ENGLEWOOD FL 34223		1a. Principal Place of Business Address 380 KLUGE DR. ENGLEWOOD FL 34223			
2. Principal Place of Business SAME		2a. Mailing Address		3. Date Organized or Qualified 06/30/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation FL	
City & State		City & State		4. FEI Number 65-0577577	
Zip		Country		5. Date of Last Report 05/01/1997	
7. Name and Address of Current Registered Agent NEWBERGER, FREDERICK L SR. 380 KLUGE DRIVE ENGLEWOOD FL 34223		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 800002502418--5 City FL -04/28/98--01035--017 ****188.75 ****188.75			
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>Frederick L Newberger Sr</i> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)				DATE 4-15-98	
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	NEWBERGER, FREDERICK L	380 KLUGE DRIVE		ENGLEWOOD FL	
MGRM	NEWBERGER, BEATRICE V	380 KLUGE DRIVE		ENGLEWOOD 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. 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: *Frederick L Newberger Sr* **4/15/98**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER