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

attachment with an address.

SIGNATURE:

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State FILED 1997 DIVISION OF CORPORATIONS 97 HAR 20 PM 12: 04 Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company SECRETATIV OF STATE

1A. Principal Place of Business, Abdres PIDA **DOCUMENT** #194000000384 CANTERBURY REALTY, L.C. 2295 CORPORATE BLVD. 2295 CORPORATE BLVD. MWB SUITE 134 SUITE 134 BOCA RATON FL 33431 BOCA RATON FL 33431 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 08/10/1994 ${f FL}$ Suite, Apt. #, etc. Sulte, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65--0510542 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Country \$8.75 Additional Fee Regulred 06/10/1996 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent ROTHMAN, LEE M 2295 CORPORATE BLVD. Street Address (P.O. Box Number Is Not Acceptable) #134 BOCA RATON FL 33431 Suite, Apl. #, etc. City Zip Code 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. (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title MÉM ANSEL, JEROME 7626 FENWICK PLACE BOCA RATON FL MEM ROTHMAN, NORMAN 17168 BORTHWAY CIRCLE BOCA RATON FL 100002122681--9 -03/24/97--01202--001 ****203.75 ****203.75 11. Ido hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If unther 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 508, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER