


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	
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L94000000401 KENNEDY SQUARE INVESTORS, L.C. 526 CENTRAL AVE #200 ST. PETERSBURG FL 33701		1a. Principal Place of Business Address 526 CENTRAL AVE #200 ST. PETERSBURG FL 33701	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 08/16/1994		3a. State of Formation FL	
4. FEI Number 59-3258823		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 04/23/1998		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent BURSİK, PETER D 526 CENTRAL AVENUE SUITE 200 ST. PETERSBURG FL 33701		8. Name and Address of New Registered Agent/Office Name 188.75 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code 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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when fees are due) <div style="text-align: right;"> 3000028281831- - 7 DATE 04/02/99--01082--004 ****188.75 ****188.75 </div>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	CONVENIENT CARE PROP,	3275 66TH ST. NORTH, STE.	ST. PETERSBURG FL
MGRM	APPLE, PHILLIP B	6759 1ST AVE SOUTH	ST PETERSBURG FL
MGRM	BRIGHTWATERS HOLDING,	526 CENTRAL AVENUE., SUITE	ST. PETERSBURG FL
MGRM	PRATHER, CHARLES	526 CENTRAL AVENUE, SUITE	ST PETERSBURG FL
MGRM	HERETICK, KENNETH W	526 CENTRAL AVENUE, SUITE	ST PETERSBURG FL
MGRM	HERETICK, PAUL V	526 CENTRAL AVENUE, SUITE	ST PETERSBURG FL
<i>dcc</i>			
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: <i>Peter D. Bursik</i> 3/16/99 127 823 1230 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>			