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

SIGNATURE:

INHSE10 R(12-96)

LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State FILED 1997 DIVISION OF CORPORATIONS 97 APR 21 PM 2: 06 **FILING FEE** Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company SECRETARY OF STATE TALLAHASSEE, FLORIDA 1a. Principal Place of Business Address NDB/SRQ, L.C. 8323 CYPRESS HOLLOW DR. 323 CYPRESS HOLLOW DR. SARASOTA FL 34238 SARASOTA FL 34238 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 **0**9/09/1994 Sulte, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0528061 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 04/19/1996 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent KAHL, RUSSELL E 771 OLD COMPASS ROAD Street Address (P.O. Box Number is Not Acceptable) LONGBOAT KEY FL 34228 Suite, Apt. #, etc. 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) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM WEEGHMAN, RICHARD B \$323 CYPRESS HOLLOW DR. \$ARASOTA FL MGRM KAHL, RUSSELL 771 OLD COMPASS RD. HONGBOAT KEY FL MGRM TAIT, JOHN E 2410 HARBOURSIDE DRIVE LONGBOAT KEY FL 800002152338--8 -04/23/97--01092--011 \*\*\*\*\*203.75 \*\*\*\*\*203.75 11. Ido hereby certify that the information supplied with fills filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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. attachment with an address.

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

841-383-1663 Russell Familia