

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 15 AM 9:37

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 # L94000000634**

DANA'S HOUSEKEEPING DISBURSEMENT FUND OF
AMPA BAY, L.C.
107 MARSHALL ST
SAFETY HARBOR FL 34695

1a. Principal Place of Business Address

107 MARSHALL ST
SAFETY HARBOR FL 34695

2. Principal Place of Business

401 S. ANTONIO AVE

Suite, Apt. #, etc.

SUITE #1

City & State

CLERMONT, FL

Zip

33765

Country

FLORIDA

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Organized or Qualified

11/23/1994

3a. State of Formation

FL

4. FEI Number

59-3279508

☐ Applied For

☐ Not Applicable

5. Date of Last Report

03/27/1997

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

BROOKS, J. HENRY
107 MARSHALL ST
SAFETY HARBOR FL 34695

8. Name and Address of New Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

800002498508--9

Suite, Apt. #, etc.

04/23/98-01116-015

****188.75 ****188.75

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 reinstating)

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BROOKS, J. HENRY	107 MARSHALL ST	SAFETY HARBOR FL
MGRM	BROOKS, DARLENE L	107 MARSHALL ST	SAFETY HARBOR 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:

J. Henry Brooks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/10/98

Date

813
446-5013

Daytime Phone #