


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 50 MAY -3 PM 12:35 mth 5/5	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # 194000000646</b> <b>FLORIDA GULF LIMITED COMPANY</b> <del>3183 DICK WILSON DRIVE</del> <del>SARASOTA FL 34240</del> 4005 CROYDON DR NW CANTON OHIO 44718		1a. Principal Place of Business Address <del>2201 CANTU CT.</del> <del>SUITE 102</del> <del>SARASOTA FL 43232</del>			
2. Principal Place of Business 4005 CROYDON DR NW Suite, Apt. #, etc.		2a. Mailing Address 4005 CROYDON DR NW Suite, Apt. #, etc.		3. Date Organized or Qualified 11/28/1994	
City & State CANTON OHIO		City & State CANTON OHIO		3a. State of Formation FL	
Zip 44718		Country USA		4. FEI Number 31-1423846 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 03/16/1998		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent <b>HAHN, ALEXANDER D</b> 3183 DICK WILSON DRIVE SARASOTA FL 34240			8. Name and Address of New Registered Agent/Office Name <b>GLEN A SCHAFFERT</b> Street Address (P.O. Box Number is Not Acceptable) 1800 BENTAMEN FRANKLIN DR Suite, Apt. #, etc. A101 City SARASOTA Zip Code FL 34236		
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 <u>Glen A Schaffert</u> DATE <u>4-29-99</u> <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when for listing)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
<del>MGR</del>	<del>HAHN, ALEXANDER D</del>	<del>3183 DICK WILSON DRIVE</del>		<del>SARASOTA FL</del>	
MEM	BAKER, DONALD T	23512 QUAIL HOLLOW DR.		WESTLAKE OH	
<del>MEM</del>	<del>B &amp; H, INC.</del>	<del>19800 DETROIT ROAD</del>		<del>ROCKY RIVER OH</del>	
MGR	SCHAFFERT, GLEN A	4005 CROYDON DR., NW		CANTON OH	
<del>MEM</del>	<del>THOMAS, TRUMAN</del>	<del>4223 ALTAMOUT RD.</del>		<del>BIRMINGHAM AL</del>	
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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: Glen A Schaffert 4-29-99 330580-5202  
(Signature and Typed or Printed Name of Signing Managing Member or Manager)