
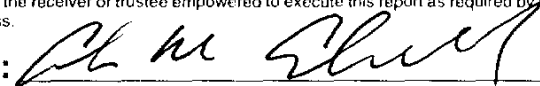


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 APR -8 PM 1:01 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 G/G, L.C. P.O. BOX 698 SARASOTA FL 34230		DOCUMENT # L94000000663		1a. Principal Place of Business Address 3815 N OSPREY AVE SARASOTA FL 34234	
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 12/06/1994	
				3a. State of Formation FL	
				4. FEI Number 65-0544373 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report 04/03/1998	
				6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent ELWELL, ALAN M 3815 N OSPREY AVE SARASOTA FL 34234			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 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 _____				DATE _____	
<small>(Registered Agent Accepting Appointment) (R-9) (Registered Agent Signature Required when designated agent)</small>					
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code		
MGRM	ATCO, INC.	3815 N OSPREY AVE	SARASOTA FL		
MGRM	ROGERS, BURT ████ K.	1255 GULF STREAM AVE	SARASOTA FL		
MGRM	HESSER, HAROLD M	4714 ACORN CIR	BRADENTON FL		
MGRM	MILHOLLAND, JACK W JR	6885 CORAL CIRCLE	SARASOTA FL		
MGRM	ELWELL, ALAN M	2231 SUNNYSIDE LN 3311 Wobben Woods Dr.	SARASOTA FL		
4-14-99 04/15/99 - 01114 - 008 ****188.75 ****188.75					
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: 		2/18/99		(941) 355-7419	