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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

97 FEB -3 PM 3: 46

\$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1 Name and Maling Address of Limited Liability Company DOCUMENT #L94000000697 KEMMR, L.C. 1920 GUNN HIGHWAY 1920 GUNN HI	\$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1 Name and Mailing Address of Limited Liability Company DOCUMENT #L94000000697 KEMMR, L.C. 1920 GUNN HIGHWAY 1920	FILING									
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Street Address (P.O. Box Number Is Not Acceptable) DESSA FL 33556 Suite, Apt. #, etc.					t Registere	ed Agent			B. Name and Addre	ss of New Re	gistered Agent
Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.			7 Names	and Address of Current	l Begleters	trana ha	ł				gistered Agent
7. Name and Address of Current Registered Agent RESSLER, ERIC A 1.920 GUNN HIGHWAY DDESSA FL 33556 Suite, Apt. #, etc.	7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent	Zip		Country	Zip		Cou	•	 	6	\$8.75 Additional Fee Required
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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 808, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGN	ATU	IRE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER