File on 6r before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

Subject to a \$ 400.00 EATE FEE.										
LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State							eu en			
1999 DIVISION OF CORPORATIONS							1	FILED		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE								93 MAR -5 PM 5: 00		
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L9400000729							72	SCORETARY OF STATE		
WEBB, LORAH & COMPANY, P.L.								1a. Principal Place of Business Address		
1625 WEST MARION AVE.							1625 WE	1625 WEST MARION AVE.		
SUITE 6 PUNTA GORDA FL 33950							SUITE 6			
PONTA GORDA EL 33930							PUNTA G	PUNTA GORDA FL 33950		
2 Principal Place of Business 2a. Mailin				ng Address			3. Date Organize	ed or Qualified	3a. State of Formation	
				pt. #, etc.			01/01/1	995	FL	
Suite, Apt. #, etc. Suite,				μι. », ει ο.			4. FEI Number		Applied For	
City & State Ci			City & St	City & State			65-0161	812	Not Applicable	
Zip		Country	ŽID.	Coun			_ 5 . Date of Last F	leport	6. Certificate of Status Desired	
i sib	ļ	Courtary	1 44		Count	y	02/26/1	998	\$8.75 Additional Fee Required	
	7. Name	and Address of Curren	Registered	Agent		8.	Name and Address	s of New Regis	tered Agent/Office	
WEBB, SANKEY E 111						Name	Name			
	WEST M	IARION AVE.	Street Address (F			P.O. Box Number is Not Acceptable)				
PUNTA GORDA FL 33950						Suite, Apt. #, etc.				
				City Zip Code			Zip Code			
				Olly		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 (Register a Agent Accepting Appointment). (Notice Register of Agent Septembring and Accepting Appointment).										
10. Title Managing Members/Managers			Business Street Address				City	State and Zip Code		
MRGM	WEBB, SANKEY E III			1625 WEST MARION A			AVE., STE	PUNTA	GORDA FL	
MRGM	LORAH, GEOFFREY L			1625 WEST MARION A			AVE., STE	PUNTA	GORDA FL	
							ទះព	00.04	የምጠናዝፍ ፖርፍ	
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. Hurther 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 trusted 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: Sankou E Webb. III Mar Mar. 2/17/99										