File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY & FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** FILED Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAR 19 PM 3: 39 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 195000000004** 1a. Principal Place of Business Address WMR PROPERTIES, L.C. 223 TAYLOR STREET 223 TAYLOR STREET PUNTA GORDA FL 33950 PUNTA GORDA FL 33950 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 01/01/1995 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0569141 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country s8-75 Additional Fee Required 04/21/1997 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent WOTITZKY, EDWARD L 223 TAYLOR STREET Street Address (P.O. Box Number is Not Acceptable) PUNTA GORDA FL 33950 300002464293---3 -03/20/98--01126--023 Suite, Apt. #, etc. ****188.75 ****188.75 City 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 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 223 TAYLOR STREET MGRM WOTITZKY, EDWARD L PUNTA GORDA FL MEM MIZELL, JOHN B 223 TAYLOR STREET PUNTA GORDA FL MEM ROSS, WARREN R 223 TAYLOR STREET PUNTA GORDA FL MEM WOTITZKY, HAL F 223 TAYLOR STREET PUNTA GORDA 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: F

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER) IR MANAGER

2/27/98 (941)639-2171

Daytime Phone #

Date