File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 APR -9 AM 9: 24 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE xk 4/13 Name and Mailing Address of Limited Liability Company DOCUMENT # L9500000302 1a. Principal Place of Business Address RICHARDSON LUXURY HOMES, L.C. 215 MOUNTAIN DRIVE ·215 MOUNTAIN DRIVE SUITE 111 SUITE 111 DESTIN FL 32541 DESTIN-FL-32541 3. Date Organized or Qualified 2. Principal Place of Business 2a. Mailing Address 3a. State of Formation P.O. Box Suite, Apt. #, etc. 04/14/1995 4. FEI Number Applied For City & State City & State Not Applicable 59-3312950 5. Date of Last Report 6. Certificate of Status Desired Country Country 32540 \$8.75 Additional Fee Required USA 04/18/1997

8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent JULIE RICHARDSON
Street Address (P.O. Box Number is Not Acceptable) <del>RICHARDS</del>ON, RUSSELL 215 MOUNTAIN DRIVE 217 T Suite, Apt. #, etc. BEACH DR. SUITE 111 DESTIN FL 32541 City Zip Code DESTIN 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 ed Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 215 MOUNTAIN DRIVE, SUITE 32541 MGRM RICHARDSON, MICHAEL DESTIN FL 217 BEACH DR. 100002488**741**---5 -04/14/98--01037--017 \*\*\*\*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 eath; that I am a managing member or manager of the lighted 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

MICHAEL RICHARDSON

ř

attachment with an address.