


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED <i>4/21</i> 98 APR 20 PM 12:50 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					
Name and Mailing Address of Limited Liability Company DOCUMENT # L95000000321 DUCAT BOWLING INVESTMENTS, L.C. 721 HERITAGE DRIVE WINTER HAVEN FL 33881				1a. Principal Place of Business Address 721 HERITAGE DRIVE WINTER HAVEN FL 33881	
2. Principal Place of Business <i>2829 Sunset Dr NW</i> Suite, Apt. #, etc.		2a. Mailing Address <i>2829 Sunset Dr NW</i> Suite, Apt. #, etc.		3. Date Organized or Qualified <i>04/24/1995</i>	
City & State <i>Winter Haven, FL</i> Zip <i>33881</i>		City & State <i>Winter Haven FL</i> Zip <i>33881</i>		3a. State of Formation FL	
				4. FEI Number <i>59-3332606</i> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report <i>04/14/1997</i>	
				6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent DUCAT, MICHAEL A 721 HERITAGE DRIVE WINTER HAVEN FL 33881			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) <i>2829 Sunset Dr. NW</i> Suite, Apt. #, etc. City <i>Winter Haven</i> FL Zip Code <i>33881</i>		
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 <i>Michael A. Ducat</i> DATE <i>4-14-98</i> <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title Managing Members/Managers		Business Street Address		City, State and Zip Code	
MGRM DUCAT, MICHAEL A		721 HERITAGE DRIVE		WINTER HAVEN FL	
MGRM DUCAT, SHEA J		721 HERITAGE DRIVE		WINTER HAVEN FL	
		<i>2829 Sunset Dr NW</i>			
				000002497740--7 -04/23/98--01049--001 ****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) (f), 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:

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

Date

Daytime Phone #

4-14-98 (941) 294-3295