LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						SECRETARY OF STATE DIVISION OF CORPORATIONS 99 APR 20 AM 11: 45		
1 Name and Mailing Address of Limited Liability Company DOCUMENT # L95000000493 IMMO TUSCAWILLA, L.C. 8506 BAY RILL BOULEVARD ORLANDO FL 32819					1a. Principal Place of Business Address 8506 BAY HILL BOULEVARD ORLANDO FL 32819			
2 Principal Place of Business 2a. Maili			ng Address		3. Date Organize		3a. State of Formation	
Suite, Apt	#. etc	Suite, Apt	Suite, Apt. #, etc.			23/1995 FL		
						\ \ <u>\\-\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>		Applied For
City & State .		City & Sta	ıte		59-3321787 Not Applic		Not Applicable	
Zip	Country	Zip	Co	ountry	1	•	\$8.75 Additional	
	7. Name and Address of Cu	rent Registered	Agent		Name and Addres		tered Agent/Offic	ce
its register as register	nt to the provisions of Sections 608 ed office or registered agent, or both, ed agent, and accept the obligation	in the State of Flor s.	rida. Such change w	he above named limite vas authorized by aftirn	native vote of a majori	FL ubmits this state by of the member	Zip Code	osp of changin the appointmen
0. Title	Title Managing Members/Managers		Business Street Address		5	City, State and Zip Code		
MGR MESTDAGH, RENE			8506 BAY HILL BOULEVARD			ORLANDO FL		57~-006
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