File on or before May 1, 1998 or subject to a \$ 400.00 LATE FEE.		Liability Com	pany will be			
LIMITED LIABILITY COMPANY ANNUAL REPORT 1998	LORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS		SECRETARY OF STATE DIVISION OF CORPORATIONS  98 FEB 26 PM 1:43			
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE					. 20 20	, Lu 1: 43
1. Name and Malling Address of Limited Liability Company DOCUMENT # L95000000588				3/3 1a. Prindibal Place of Business Address		
COLD SPRINGS COMMUNITIES, L.C. 5728 MAJOR BOULEVARD SUITE 309 ORLANDO FL 32819				5728 MAJOR BOULEVARD SUITE 309 ORLANDO FL 32819		
Principal Place of Business 2a. Mailin		ng Address		3. Date Organize	ed or Qualified	3a. State of Formation
Suite, Apt. #, etc. Suite, Apt		. #, etc.		07/26/1995 FL 4. FEI Number		FL Applied For
City & State City & Sta		ite		59-3329117		Not Applicable
Zip Country	Zip	Zip Country		5. Date of Last Report		6. Certificate of Status Desired  88 75 Additional Fee Required
7. Name and Address of Current (	legistered a	Agent	B. N	03/27/1	997 of New Regist	lered Agent/Office
		Sulte, Apt. #, etc.  City  Statutes, the above-named limited liability company submits this change was authorized by affirmative vote of a majority of the men				
SIGNATURE DATE  (Fingistered Agent Accepting Approximated) (NOTE Registered Agent signature required when reinstating)						
Title Managing Members/Managers		Business Street Address		City, State and Zip Code		
1			% 5728 MAJOR BLVD., SUITE % 5728 MAJOR BLVD., SUITE		ORLANDO FL	
				30	0002 -03/05 ****1	<b>4474832</b> /9801005014 88.75 ****188,75
11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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 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.  John H. Marling, Managing Director						
SIGNATURE:    SIGNATURE   AND LYPE D CHEPTING DED NAME OF SIGNING MANAGING MEMBER OR MANAGER   Date   Devinto Phone #						

INHSE10 R (12-97)