


2nd and
FINAL NOTICE: File on or before Sept. 29, 1999 or Limited Liability Company
will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 588.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT # L95000000687
DEAL LAND & MINERALS, L.C. 208 HOOD AVE FT WALTON BEACH FL 32548	

2. Principal Place of Business 215 Mountain Drive Suite, Apt. #, etc. 112 City & State Destin, FL Zip 32541	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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7. Name and Address of Current Registered Agent HAUGHT, ALEXANDRA R 5 CLIFFORD DR, SUITE 12 SHALIMAR FL 32579	8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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
MGR	DEAL, VICTOR W	208 HOOD AVE	FT WALTON BEACH FL
MEM	DEAL, AARON W	208 HOOD AVE	FT WALTON BEACH FL
MEM	DEAL, KRISTIN E	208 HOOD AVE	FT WALTON BEACH 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:  Vic. Deal 9-9-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone 1-855-588-75

FILED
99 OCT 14 AM 11:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA