File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

| , A | d Liability Company annual report 1999 | SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAY -4 PM 4: 16 | | | | | | | |
|--|---|---|----------------------------------|----------|----------------------------|---|---------------|----------------|--|
| FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1 Name and Mailing Address of Limited Liability Company DOCUMENT # L9500000941 | | | | | | | | | |
| BC&H ENTERPRISES, L.L.C. 1890 SOUTH 14TH STREET SUITE 120 FERNANDINA BEACH FL 32034 | | | | | | 1a. Principal Place of Business Address 1890 SOUTH 14TH STREET SUITE 120 FERNANDINA BEACH FL 32034 | | | |
| 2 Principal Place of Business 2a. Mailie | | | ng Address | | | 3. Date Organized or Qualified 3a. State of Formation | | | |
| Suite, Apt. | | | Suite, Apt. #, etc City & State | | | 12/01/1995 FL 4. FEI Number Applied For 59-3376760 | | | |
| | | | | <u> </u> | ~ | 5. Date of Last F | Report [| 6. Certificat | Not Applicable te of Status Desired |
| Zip | Country | Zip | | Country | y | 04/27/1 | .998 | \$8.75 Additio | onal Fee Required |
| 7. Name and Address of Current Registered Agent | | | | | 8. Name | 8. Name and Address of New Registered Agent/Office | | | |
| 1890 SUITI FERNI 9. Pursua its register as register | red office or registered agent, or both, in t red agent, and accept the obligations. | Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. | | | | | | | |
| SIGNATURE [He perce Agent Acquiring Appearance, (but to the perce Agent Separation appearance) | | | | | | | | | |
| MGRM MEM MEM | THOMPSON, HAL J THOMPSON, BEEBE THOMPSON, COURTN | S | 1890 Sc | TUC | H 14TH S H 14TH S H 14TH S | TREET | AMELIA AMELIA | AISLA | ND FL |
| 11 ohereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i), Florida Statutes. If further certify that the information indicated on this annual report is true and accurate and filating 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 trustocomposing or the receiver or trustocomposing members in Block 10, or on an attraction and 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 trustocomposing or trustocomposing or the receiver or trustocomposing or trustocomposing or the receiver or trustocomposing or the receiver or trustocomposing or the receiver of the receiver or trustocomposing or the receiver or trustocomposing or trustocomposing or the receiver or trustocomposing or trustocomposing or trustocomposing or the receiver of the receiver of the receiver of the receiver or trustocomposing or the receiver or trustocomposing or the receiver of the receiver | | | | | | | | | |