
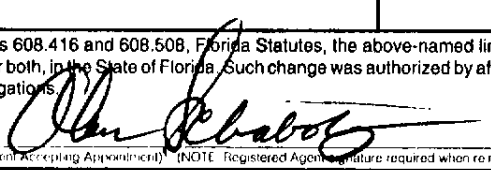


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAY -1 PM 2:00	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000000024		1a. Principal Place of Business Address	
RAINBOW RUN, L.L.C. 2075 ASHTON ROAD BOX 19452 SARASOTA FL 34276				2075 ASHTON ROAD BOX 19452 SARASOTA FL 34276	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
19190 TOLEDO BLADE BLVD		19190 TOLEDO BLADE BLVD		01/03/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation	
PO Box 380776		PO Box 380776		FL	
City & State		City & State		4. FEI Number	
MURDOCK, FL		MURDOCK, FL		65-6233692	
Zip		Zip		5. Date of Last Report	
33938		33938		04/14/1997	
Country		Country		6. Certificate of Status Desired	
USA		USA		SB 75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
SCHABOTZ, ALAN 3533 ROXANE BLVD. SARASOTA FL 34235		Name			
		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City			
		Zip Code			
		FL			
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 4/24/98	
(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	MURPHY, BRUCE	3533 ROXANE BLVD 2440 AUBURN BLVD		SARASOTA FL PORT CHARLOTTE, FL 33948	
				7000002516077--4 -05/07/98--0115--006 ****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)(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: Bruce Murphy, Mgr. Bruce Murphy 4/26/98

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

Date

Signature of Officer