FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

FILING FEE

Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee

1997 APR 24 AN IO: 10 SECRETARY OF STATE

| \$ 203. | | | | | | | TALLAHASSEE. FLORIDA | | | | | |
|---|------------------------|---|------------------------------|--------------------------------|---|---------------------------------|----------------------|--|--------------------------------------|-------------------------------------|--|--|
| 1. Name and Mailing Address of Limited Liability Company DOCUMENT # L9600000037 | | | | | | |] | | | | | |
| Ε | STSC/SOL | MERSET L.C. | | | | | | 1a. Principal Place of Business Address | | | | |
| | | RIWINKLE WAY | | | | | | 1149 PERIWINKLE WAY | | | | |
| S | SANIBEL | ISLAND FL 3 | 3957 | | | | | SANIBEL ISLAND FL 33957 | | | | |
| | | | | | | | | | | | | |
| ii above n | nailing address is | incorrect in any way, line throu | igh incorrect | information | and enter con | rection In Block | k 2a | | | | | |
| 2. Princip | al Place of Busi | iness | | ing Address | | | | 3. Date Organize | ed or Qualified | 3a. State of Fo | rmation | |
| Suite, Apt. | 1 METRIC |) PARKWAY | Suite Ani | e, Apt. #, etc. | | | | 01/08/1996 | | FL | | |
| | • | | Collo, Fig. | ιιο, ομι. π, σιο. | | | | 4. FEI Number | | | Applied For | |
| | <u>⊤€ A</u> | | City & Sta | City & State | | | | 65-0637621 | | | Not Applicable | |
| FT. | MYERS | FL Country USA | <u> </u> | | | | | * | | | Status Desired | |
| | | | Zip | | Countr | ry | | | | \$8.75 Additional | | |
| <u>> </u> | 9() | LEE and Address of Current 6 | Contestand | 4 appl | | | | ^ Name and Add | of New De | | | |
| | /. (14H)1 0 | and Address of Current | (efficience | Agent | | 8. Name and Address of New Name | | | | redisteleo Yõeur | | |
| | NN, JOI | | | | | | | | | | | |
| | | NKLE WAY AND FL 33957 | i | | | Street Add | dress (F | P.O. Box Number is Not Acceptable) | | | | |
| DV/MT1 | aria nasa | AND EL SSESI | | | Sulte, Apl. #, etc | | | | | | | |
| | | | | Suite, Apr. #, etc | | | . п, ок. | • | | | | |
| | | | | | | City | | | | Zip Code | | |
| | | | | | | | | <u> </u> | | | | |
| 9. Pursua its register | ent to the provis | tions of Sections 608.416 a istered agent, or both, in the | nd 608.508, State of Flor | , Florida Sta rida. Such ci | itutes, the at | bove-named uthorized by | i timited affirma | liability company si tive vote of a majorit | ubmits this state v of the member | ment for the purps. I hereby accept | oose of changing the appointment | |
| | | accept the obligations. | | | - | | | | • | | ,, | |
| SIGNATU | RE | | | ····· | ···· | | | <u>,,</u> [| DATE | | ······································ | |
| 10. Title | Mar | (Registered Agent Accepting A | | IOTE Registered | OTE Registered Agent signature required when reinstating Business Street Address | | | <u>)</u> | , | State and Zip Ci | wia | |
| TO. Title | IVIAI | Managing Members/Managers | | | Dusiness Griddi Acciess | | | | Oily, | State and zip Or | J. O. O. | |
| MEM | משפ השי | VELOPMENT CO | מפו | 1140 | DEDTM | INKLE | T-T-N-S | , | ~**** | **** | | |
| MEN | DIO DE | VELOPMENT CO | RP, | 1149 | PERIW. | TNVTE | WAI | 4 | SANTREL | ISLAND | F.T | |
| MEM | BTS CO | NSTRUCTION C | OR, | 1149 | PERIW | INKLE | WAY | ? | SANIBEI | ISLAND | FL | |
| MGR | NAUMANI | N, JOHN J | , | 1149 | PERIW: | INKLE | WAY | ? | SANIBEI | ISLAND | FL | |
| MGR | MILTON | , JEFFFREY J | • | 1149 | PERIW | INKLE | WAY | ? | SANIBEL | ISLAND | FL | |
| | | | | | | | | | | | | |
| ŗ | | | | ļ | | | | o.r | _ | | 20 | |
| 1 1 | | | | | | | | Q. | -04/25 | 1587 9/97010 203.75 * | 87039 | |
| Ĺ | | | | | | | | | 非非非非 | 203.75 * | ****203.75 | |
| | | | | | | | | | | | 250 alg V | |
| | | | | | | | | | | | 400 | |
| 4413-4 | | at - 1-1 | L 46 la 8111 a · · · 4 | | 116 . 4 a a b a | | | Mine 410 07/01/71 | India Statut | 1.6 mlb | A 1 h i a fa | |

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 eath; 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 AND TYPED OR FRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

BTS Construction Corp.

| SI | \wedge | R. | A | 77 | п | | | |
|------|----------|----|---|----|---|---|----|--|
| . 31 | | IV | 4 | u | л | - | ┖. | |