

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

FILED

99 AUG -9 AM 9:49

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 + \$68.75 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 # L96000000042**

FLORIDA INCOME PROPERTIES I, L.C.
~~416 EAST STATE STREET~~
ROCKFORD IL 61104

1a. Principal Place of Business Address

3815 N. MULFORD
ROCKFORD IL 61114

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	3815 N. Mulford
City & State	Rockford, IL
Zip	61114
Country	Country

3. Date Organized or Qualified	3a. State of Formation
01/09/1996	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
36-4068334	
5. Date of Last Report	6. Certificate of Status Desired
06/08/1998	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent

HARDING, JANET
8111 BAY COLONY, #1201
NAPLES FL 33963

8. Name and Address of New Registered Agent/Office

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 _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BEEKMAN, BRENT T	1215 TUNEBERG PARKWAY	BELVIDERE IL

100002966171--5
-08/23/99--01012--004
****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: Brent Beekman 7/15/99 815-637-0170
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #



Camelot Tower • 1415 East State Street • Suite 700 • Rockford, Illinois 61104 • Phone (815) 964-9955 • Fax (815) 964-3601

Certified Public Accountants and Consultants

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STEPHEN WEINBERG PC.
JAMES B. PRINGLEY
CLAUDE C. ZUBA

SECRETARY OF STATE
TALLAHASSEE FLORIDA

July 30, 1999

Florida Department of Revenue
Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

Re: FEIN#36-4068334

Today we received the enclosed "Limited Liability Company Annual Report" form. This form was mailed by you to an incorrect address; consequently, we were unable to file the report in a timely manner. Please correct our mailing address to 3815 N. Mulford, Rockford, IL 61114.

Enclosed is our check for \$188.75. We respectfully request that the late fee be waived.

Sincerely,

Stephen Weinberg

Encl.