File on or before May 1, 1998 or Limited Liability Company will be FILED STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS 'subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State \$8 APR -9 AM 8: 50 1998 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee 164/13 \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
 of Limited Liability Company **DOCUMENT #** L9600000159 1a. Principal Place of Business Address ORLANDO TECHCENTER II, L.L.C. 1400 E. NEWPORT CENTER DRIVE 1400 E. NEWPORT CENTER DRIVE SUITE 209 SUITE 209 DEERFIELD FL 33442 DEERFIELD FL 33442 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 02/06/1996 FL Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 65-0648018 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Required 03/17/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office FAMES R. KAY
Street Address (P.O. Box Number is Not Acceptable) KAY, JAMES R 2000 PALM BEACH LAKES BLVD SUITE 1002 WEST PALM BEACH FL 33409 City Zip Code West Valm 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. 100002488281--2 -04/14/98---01062---021 SIGNATURE \_ \*\*\*\*197,50 \*\*\*\*\*197,50 (Registered Agont Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR ACKERMANS, UTA HOCHSTRASSE 12, D-47877 WILLICH-SCHIEFBAHN, HAHN, ULRICH HOCHSTRASSE 12, D-47877 WILLICH-SCHIEFBAHN, MaR Markes Volhel Occilield Beach Fl. TOR Guenther Rushing 1400 E Nouspart Center Dave 11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Floride 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 true ee 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 PHINTED NAME OF SIGNING WARAGING MEMBER OR MANAGER

SIGNATURE: