


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

APPROVED  
AND  
FILED

97 APR 28 PM 12:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>FILING FEE</b> \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company	<b>DOCUMENT #L96000000326</b>
MAGI BUILDERS, L.C. 14831 LAGUNA DRIVE FORT MYERS FL 33908	

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business	2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1a. Principal Place of Business Address
14831 LAGUNA DRIVE FORT MYERS FL 33908

3. Date Organized or Qualified	3a. State of Formation
03/20/1996	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
65-0662780	
5. Date of Last Report	6. Certificate of Status Desired
	SB 75: Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent
RIZZO, THOMAS F ESQUIRE 2340 PERIWINKLE WAY, SUITE J2 SANIBEL FL 33957

8. Name and Address of New Registered Agent	
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	OHLMAN, MILTON F II	14831 LAGUNA DRIVE	FORT MYERS FL
MGR	SOUTHWEST COAST LAND C	14831 LAGUNA DRIVE	FORT MYERS FL
MEM	PASIG, DONALD L	14831 LAGUNA DRIVE	FORT MYERS FL

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-05/02/97--01057--008  
\*\*\*\*203.75 \*\*\*\*203.75

*A. Alan*  
4/28/97

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: Milton F. Ohlman, II 4-23-97 944433-1100  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #