

**2nd NOTICE:**

Limited Liability Company Will Be Dissolved On Or  
After October 8, 1997. If Dissolved, Minimum Amount  
Due To Reinstate: \$703.75

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 SEP 23 AM 9:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILING FEE** Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee + \$385.00 Late Fee  
**\$ 588.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company **DOCUMENT #L96000000508**  
**NEW-SON CONSTRUCTION MANAGEMENT COMPANY, L**  
**.C.**  
**1881 PLEASANT HILL RD.**  
**KISSIMMEE FL 34746**

1a. Principal Place of Business Address

**1881 PLEASANT HILL RD.**  
**KISSIMMEE FL 34746**

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		3. Date Organized or Qualified		3a. State of Formation	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/07/1996		FL	
City & State		City & State		4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Country		5. Date of Last Report		6. Certificate of Status Desired	
						<input type="checkbox"/> \$8.75 Additional Fee Required	

## 7. Name and Address of Current Registered Agent

~~LAROSA, DENNIS E~~  
~~216 W. COLLEGE AVE.~~  
~~SUITE 202~~  
~~TALLAHASSEE FL 32301~~

## 8. Name and Address of New Registered Agent

Name **RAYMOND T. WATSON**  
Street Address (P.O. Box Number is Not Acceptable)  
**713 CONESUS LN.**  
Suite, Apt. #, etc.  
City **Winter Spgs.** **FL** Zip Code **32708**

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 **9/17/97**

(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	NEWGENT, JACK S	1881 PLEASANT HILL RD.	KISSIMMEE FL
MGR	WATSON, RAYMOND T	713 CONESUS LANE	WINTER PARK FL
MGR	SCHOLL, JACK A	1821 HUGHEY ST.	KISSIMMEE FL
MGR	MONK, DAVID T	510 N. DOVER RD.	TEQUESTA FL

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\*\*\*\*588.75 \*\*\*\*588.75

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:

9/17/97 407-935-9077