
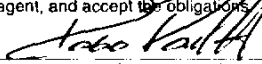
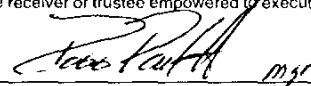


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 50 APR 30 PM 4:14	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000000720 OSBORNE-FRAZIER FAMILY PARTNERSHIP, L.C. BOX 875 SHALIMAR FL 32579		1a. Principal Place of Business Address 777 SUNDIAL COURT #1 FORT WALTON BEACH FL 32548			
2. Principal Place of Business 745 Hollywood Blvd Suite, Apt. #, etc.		2a. Mailing Address 745 Hollywood Blvd Suite, Apt. #, etc.		3. Date Organized or Qualified 07/05/1996	
City & State Ft. Walton Beach, FL		City & State Ft. Walton Beach, FL		4. FEI Number 59-3389782	
Zip 32548		Zip 32548		5. Date of Last Report 03/27/1998	
7. Name and Address of Current Registered Agent FRAZIER, GLORIA K 11 GRANDVIEW DR SHALIMAR FL 32579		8. Name and Address of New Registered Agent/Office Name Osborne Robert P Street Address (P.O. Box Number is Not Acceptable) 151 Eldredge Rd. Suite, Apt. #, etc. City Ft. Walton Beach FL Zip Code 32548			
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 4/28/99			
10. Title MGR		Managing Members/Managers OSBORNE, ROBERT P		Business Street Address 151 ELDREDGE RD	
MGR		FRAZIER, GLORIA K		11 GRANDVIEW DR	
MGR		CATHY KIEFER		33474 Emerald Coast Pkwy	
				DESTIN, FL 32541	
				700002866967-2 -05/07/99 -01066-017 ****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: 		4/28/99 244-1928			