File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE **Katherine Harris** ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS an IPR 23 46 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company DOCUMENT # 196000000739 1a. Principal Place of Business Address JUPITER GREENWICH, LLC 6460 MARINER SANDS DRIVE 6460 MARINER SANDS DRIVE STUART FL 34997 STUART FL 34997 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 07/12/1996 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0706396 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Ζip Country Ζip Country \$8.75 Additional Fee Required 03/06/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office COWIN, ROBERT E 6460 MARINER SANDS DRIVE Street Address (P.O. Box Number is Not Acceptable) STUART FL 34997 Suite, Apt. #, etc. Zip Code 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 _ Chagasterics Agent Asserting Appointments of PDE. Bug several Agent signature responsitives may be up-10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code COWIN, ROBERT E MEM 6460 MARINER SANDS DRIVE STUART FL MEM KEATHLEY, TERRY M 7250 SE FEDERAL HWY HOBE SOUND FL MEM COOK, ROBERT B 11911 US HWY 1, SUITE 205 NORTH PALM BEACH FL 300002856893---**\$** -04/23/39--01037--013 ****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 it made under oath, that I am a managing member or manager of the limited lability 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

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attachment with an address.

SIGNATURE: