2nd and File on or before Sept. 29, 1999 or Limited Liability Company FINAL NOTICE: will be dissolved. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 JUL 26 PH 2: 17 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 588.75 Name and Mailing Address of Limited Liability Company **DOCUMENT #** 1,96000000911 1a. Principal Place of Business Address ACES Q.C., L.C. 1421 NW 47TH TERRACE 1421 NW 47TH TERRACE GAINESVILLE FL 32605 GAINESVILLE FL 32605 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 08/26/1996 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3397689 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country \$8.75 Additional Fee Required 04/29/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BARTLETT, RODNEY J 1421 NW 47TH TERRACE Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE FL 32605 Suite, Apt. #, etc. City 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 __

(Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) Managing Members/Managers **Business Street Address** City. State and Zio Code 10. Title MGR BARTLETT, RODNEY J 1421 NW 47TH TERRACE GAINESVILLE FL BARTLETT, BEVERLY F 1421 NW 47TH TERRACE MGRM GAINESVILLE FL **000002946740---**-03/02/93--01006--003 ****588.75 ****588.75

Not Applicable

11. I to 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

SIGNATURE:

School of Printed Name of Signing Managing Member of Manager Date Date Description