



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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000000922 GREEN OAK TERRACE OF FT. MYERS L.C. 4951 TAMIAMI TRAIL NORTH SUITE 3 NAPLES FL 34103		1a. Principal Place of Business Address 4951 TAMIAMI TRAIL NORTH SUITE 3 NAPLES FL 34103	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
2. Principal Place of Business 4951 TAMIAMI TRAIL N. Suite, Apt. #, etc. SUITE #3 City & State NAPLES, FL. Zip 34103 Country USA		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 08/30/1996		3a. State of Formation FL	
4. FEI Number 59-3412430		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report N/A		6. Certificate of Status Desired \$8.75 Additional Fee Required <input checked="" type="checkbox"/>	
7. Name and Address of Current Registered Agent HENNING, CHRISTIAN F JR. 4951 TAMIAMI TRAIL NORTH SUITE 3 NAPLES FL 34103		8. Name and Address of New Registered Agent Name HELENA A. DABROWSKI Street Address (P.O. Box Number is Not Acceptable) 4951 TAMIAMI TRAIL N. # Suite, Apt. #, etc. SUITE 3 City NAPLES Zip Code FL 34103	
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 <u>Helena A. Dabrowski</u> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE <u>3/19/97</u>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	HENNING, CHRISTIAN F JR. DABROWSKI, HELENA A.	4951 TAMIAMI TRAIL NORTH, 4951 TAMIAMI TRAIL NORTH	NAPLES FL NAPLES, FL 34103
300002122729--4 -03/24/97--01202--016 ****212.50 ****212.50 			
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: <u>Helena A. Dabrowski</u> 3/19/97 (941) 434-9410 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #			