
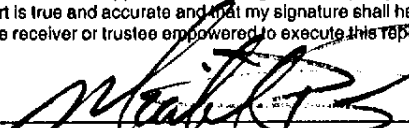


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		RECEIVED JAN 28 1997 3:05 PM	
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 RIGSBY, L.C. 1711-A SOUTH TENTH STREET SAFETY HARBOR FL 34695		DOCUMENT # L96000000936 TALLAHASSEE, FLORIDA			
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.		1a. Principal Place of Business Address 1711-A SOUTH TENTH STREET SAFETY HARBOR FL 34695 mwb			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 09/01/1996 3a. State of Formation FL 4. FEI Number 593398148 5. Date of Last Report 6. Certificate of Status Desired \$6.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent PARADISE DEVELOPMENT GROUP, INC. 1711-A SOUTH TENTH STREET SAFETY HARBOR FL 34695		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL			
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 _____ (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	PARADISE DEVELOPMENT G	1711-A SOUTH TENTH STREET		SAFETY HARBOR FL	
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: 		3/28/97		813-726-1115	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Daytime Phone #	