
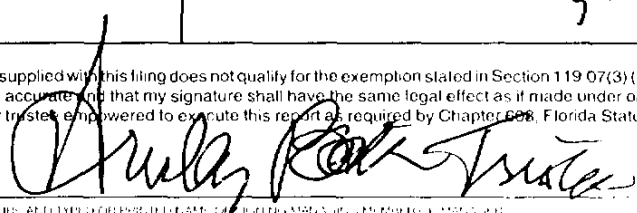


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000000951 LAKESIDE PROPERTIES, L.C. 1124 ALACHUA AVE. TALLAHASSEE FL 32308		1a. Principal Place of Business Address 1124 ALACHUA AVE. TALLAHASSEE FL 32308	
2. Principal Place of Business 4697 N. MONROE ST. Suite, Apt. #, etc.	2a. Mailing Address P.O. Box 4263 Suite, Apt. #, etc.	3. Date Organized or Qualified 09/09/1996	3a. State of Formation FL
City & State Tallahassee FL	City & State Tallahassee FL	4. FEI Number 59-3401268	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 32303	Country USA	5. Date of Last Report 04/20/1998	6. Certificate of Status Desired \$8.75 Additional Fee Required <input checked="" type="checkbox"/>
7. Name and Address of Current Registered Agent LOVETT, JOHN C ESQ. 106 EAST COLLEGE AVE. SUITE 1200 TALLAHASSEE FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 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, Accounting Agent, or both)		DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	SPEARS, DONALD	P.O. BOX 622 N/A	MALVERN AK
MGRM	DAWSON, JOHN H JR.	P.O. BOX 752 N/A	CAMDEN AK
MGRM	BOOTH, HURLEY	1124 ALACHUA AVE.	TALLAHASSEE 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 688, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.			
SIGNATURE:  Member 5/3/99			

FILED
99 MAY -7 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800002883188--3
-05/21/99--01117--023
****197.50 ****197.50