


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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAY 24 PM 1:52

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L96000001070
LODGING RESOURCES WORKSHOPS Limited Liability Company
98 S. FLETCHER AVE
AMELIA ISLAND FL 32034

1a. Principal Place of Business Address
98 S. FLETCHER AVE
AMELIA ISLAND FL 32034

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10/09/1996	FL
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		59-3478763	
Country		Country		5. Date of Last Report	6. Certificate of Status Desired
				04/13/1998	\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
LEGGIO, ANTHONY J 204 ASH STREET FERNANDINA BEACH FL 32034	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 _____ DATE _____
(Registered Agent (Accepting Appointment)) (NOTE: Registered Agent Signature required when removed)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	CAPLES, DAVID J	98 S. FLETCHER AVE	AMELIA ISLAND FL
MGRM	COOK, HELEN E	98 S. FLETCHER AVE	AMELIA ISLAND FL

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****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 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: 

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER

Date

Digitally Signed By