


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED *WJL/20*

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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| LIMITED LIABILITY COMPANY ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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| FILING FEE \$ 188.75 | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE |
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| 1. Name and Mailing Address of Limited Liability Company DOCUMENT # L96000001087 HIGHLANDER COMMUNICATIONS, L.C. 500 SOUTH FLORIDA AVENUE SUITE 600 LAKELAND FL 33801 |
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| 1a. Principal Place of Business Address 500 SOUTH FLORIDA AVENUE SUITE 600 LAKELAND FL 33801 |
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| 2. Principal Place of Business 206 E. PINE ST. Suite, Apt. #, etc. | 2a. Mailing Address 206 E. PINE ST. Suite, Apt. #, etc. |
| City & State LAKELAND, FL | City & State LAKELAND, FL |
| Zip 33801 | Country USA |

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| 3. Date Organized or Qualified 10/15/1996 | 3a. State of Formation FL |
| 4. FEI Number 59-3409628 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Date of Last Report 04/14/1997 | 6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |

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| 7. Name and Address of Current Registered Agent BLACK, KENNETH 500 SOUTH FLORIDA AVENUE SUITE 600 LAKELAND FL 33801 |
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| 8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 206 E. PINE ST. Suite, Apt. #, etc. City LAKELAND Zip Code FL 33801 |
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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 *Kenneth R. Black* DATE 4-14-98
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

| 10. Title | Managing Members/Managers | Business Street Address | City, State and Zip Code |
|-----------|---------------------------|---------------------------------------|--------------------------|
| MGRM | BLACK, KENNETH | 500 S FLORIDA AVE, STE 600 | LAKELAND FL 33801 |
| MBR | BLACK, SHERRY | 206 E. Pine St. 206 E. Pine St. | LAKELAND FL 33801 |

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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: *Kenneth R. Black* KENNETH R. BLACK
Date: 4-14-98 941 626-7767