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

attachment with an address.

SIGNATURE:

FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY 🕰 FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 98 MAR 16 PH 4: 00 1998 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L96000001112 1a. Principal Place of Business Address WETJEN ASSOCIATES, L.C. 30218 FAIRWAY DR. 30218 FAIRWAY DR. WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543 2. Principal Place of Business 2a. Malling Address 3. Date Organized or Qualified 3a. State of Formation 10/18/1996 4. FEI Number Suite, Apt. #, etc. Sulte, Apt. #, etc. Applied For City & State City & State Not Applicable 59-3407751 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Lee Required 01/20/1997

8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent WETJEN, ROLF G Street Address (P.O. Box Number is Not Acceptable) 30218 FAIRWAY DR. WESLEY CHAPEL FL 33543 Sulte, Apt. #, etc. 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 reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM WETJEN, ROLF G 30218 FAIRWAY DR. WESLEY CHAPEL FL MGRM WETJEN, GLORIA G 30218 FAIRWAY DR. WESLEY CHAPEL FL 800002461458---0, -03/19/98--01004--017 ****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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER