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 FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris **ANNUAL REPORT** Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 APR 15 AM 10: 44 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 196000001112** 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. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 10/18/1996 FL Suite, Apt. #, etc. Suite, Apt #, etc 4. FEI Number Applied For City & State City & State 59-3407751 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 03/16/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office WETJEN, ROLF G 30218 FAIRWAY DR. Street Address (P.O. Box Number is Not Acceptable) WESLEY CHAPEL FL 33543 Suite, Apt. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE \_ ..... DATE 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 2m0002848102----04/22/99--01102--616 \*\*\*\*188 75 \*\*\*\*188.79 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (1), Florida Statutes. Hurther 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 Irmiled liability company of the receiver or trustee empowered to execute the receiver as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an

SIGNATURE: Rolf G. Wetjen

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