	۰ 	•					-				
LIMITED LIABILITY COMPANY ANNUAL REPORT 1997			LORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS			97 APR 14 PM 1: 30					
FILING	Annual Report \$10	Corporation Supplemental Fee			97 APR 14 FILLION						
\$ 203	\$ 203.75 Make Check Payable To: FLORI					T OF STATE	SECRETARY OF STATE TALLAHASSEE FLORIDA				
	1. Name and Mailing Address of Limited Liability Company DOCUMENT #L96000001308										
SOUTHEAST HOLDINGS, L.C. POST OFFICE BOX 925 ORLANDO FL 32801							18. Principal Place of Business Address 1017 E. SOUTH STREET ORLANDO FL 32801				
		ncorrect in any way, <b>line t</b>		Information and ing Address	enter cor	rection in Block 2a.	3. Date Organizi	ed or Quelified	3a. State of F	ormation	
	2 Principal Place of Business 2a, Maili				ny Abalass						
Suite, Apl	Suite, Apt. #, etc. Suite, Apt				t. #, etc.			4. FEI Number			
City & Sta	City & State City &				tate			59-34/7386 Not Applicable			
Zip	Zip Country		Zip		Count	īv	5. Date of Last Report		6. Certificate of Status Desired		
				-12		,			S8-75 Additional Fee Bisquired		
	7. Name and Address of Current Registered					Name	ress of New Re	s of New Registered Agent			
BOARD	ED	Name									
p017	Street Address (P.O. B			O. Box Number Is Not Acceptable)							
ORLAN	2801	Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·						
		City			Zip Code						
9. Pursu	ant to the provisi	ons of Sections 608.41	6 and 608 508	Elorida Statute	Florida Statutes, the above-named limited liability company			FL submits the statement for the surpose of changing			
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				NOTE Registered Age	OTE Registered Agent signature required when reinstaling						
10. Title	10. Title Managing Members/Managers				Business Street Address			City	, State and Zip (	Code	
MGR	BOARDMA	OARDMAN, REED 1017				E. SOUTH STREET			ORLANDO FL		
							•	1			
								· ·			
							30	DOO2 -04/15	<b>1434</b> ; /97010	235	
								3000021434235 -04/15/9701046002 *****203.75 *****203.75			
									·····		
11. Ide hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), 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 eath; that I am a managing member or manager of the limited ligibility 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: Ref POarte Mar Mar 4-10-87 648-020 V SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER Date Day imp Prone #											

## FILE NOW: Fee after May 1, will be \$588.75

INHSE10 R(12-96)