
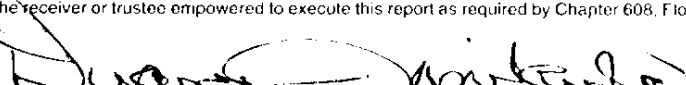


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAY -3 AM 11:32	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1 Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000001329		1a. Principal Place of Business Address	
LAKE CAMILLE PLAZA LIMITED COMPANY 4155 DINGMAN DRIVE SANIBEL FL 33957		a9-PA CM		4155 DINGMAN DRIVE SANIBEL FL 33957	
2 Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Duane Janikula		01/01/1997	
City & State		P.O. Box 1671		3a. State of Formation	
Zip		Sanibel FL		FL	
Country		33957		4. FEI Number	
		Lee		65 066 8565	
				APPLIED FOR	
				5. Date of Last Report	
				06/12/1998	
				6. Certificate of Status Desired	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
JANIKULA, DUANE 4155 DINGMAN DRIVE SANIBEL FL 33957		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, or Other Registered Agent, as applicable, to be signed by)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	JANIKULA, DUANE	4155 DINGMAN DRIVE		SANIBEL FL	
8000002871911-7 -05/11/99--01084--018 ****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:  4-24-99 4/24/99					