


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

<b>LIMITED LIABILITY COMPANY ANNUAL REPORT 1997</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>		<b>APPROVED AND FILED</b>  <b>97 APR 28 AM 9:55</b>  <b>SECRETARY OF STATE TALLAHASSEE, FLORIDA</b>	
<b>FILING FEE \$ 203.75</b>		<b>Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
<b>1. Name and Mailing Address of Limited Liability Company</b>  <b>PRICE &amp; DONOGHUE OF DUNEDIN, P.L. 811-A DOUGLAS AVENUE DUNEDIN FL 34698</b>				<b>DOCUMENT #</b> L96000001331	
<small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.</small>				<b>1a. Principal Place of Business Address</b>  811-A DOUGLAS AVENUE DUNEDIN FL 34698	
<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Organized or Qualified</b> 12/23/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>3a. State of Formation</b> FL	
City & State		City & State		<b>4. FEI Number</b> 59-3416531	
Zip		Country		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				<b>5. Date of Last Report</b>	
				<b>6. Certificate of Status Desired</b> <input type="checkbox"/> <small>See Additional Fee Required</small>	
<b>7. Name and Address of Current Registered Agent</b>  ALBANO, JUDITH A 811-A DOUGLAS AVENUE DUNEDIN FL 34698				<b>8. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable) 900002163219--6 Suite, Apt. #, etc. -05/02/97--01057--012 ****203.75 ****203.75 City FL Zip Code	
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>		<b>City, State and Zip Code</b>	
MGRM	PRICE, WILLIAM E	440 WOODS LANDING TRAIL		OLDSMAR FL	
MGRM	DONOGHUE, KEVIN J	5021 VALENCIA LANE EAST		PALM HARBOR FL	
MEM	RIDENOUR, NANCY M	2919 WYCOMBE WAY		PALM HARBOR FL	
MEM	ALBANO, JUDITH A	3663 FIFTEENTH TERRACE S.E		LARGO FL	
<i>Kevin J. Donoghue</i> 4/28/97					
<b>11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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.</b>					
<b>SIGNATURE:</b> <i>Kevin J. Donoghue</i>		<b>KEVIN J. DONOGHUE</b>		<b>4/24/97 813-785-4447</b>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>		<small>Daytime Phone #</small>	