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

LIMITED LIABILITY COMPANY
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

	199			Secre DIVISION O	tary of	tate ORATIONS		97 JUN	10 4	K11:51
FILING FEE Annual Report \$100.00 + \$103.75 Corporate Supplemental Fee \$ 203.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address DOCLIMENT # 10.000.00010.100						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
of Limited Liability Company				#L9600001343			1a. Principal Place of Business Address			
CCMD, L.C. 880 S PLEASANTBURG DR BLDG 1 GREENVILLE SC 29607							1885 COUNTRY CLUB DRIVE MT DORA FL 32757			
ti above malling address is incorrect in any way, line through Principal Place of Business			th incorrect Information and enter correction in Block 2a. 2a. Malling Address			3. Date Organized or Qualified 3a. State of Formation				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			12/22/1996 FL 4. FEI Number Applied For				
City & State			City & State			59- 3417295 6. Date of Last Report 6. Certific.		Not Applicable		
Zip	-4	Country	Zıp		Count	ry	b. Date of Last	нөроп		ditional Fee Required
	7. Name	and Address of Current	Registered	Agent			8. Name and Add	iress of New Re	gistered A	Agent
GRAHAM, JESSE E %GRAHAM, CLARK, JONES ETAL 369 N NEW YHORK AVE WINTER PARK FL 32789				Street Address (I Suite, Apt. #, etc City			(P.O. Box Number is Not Acceptable) c.			
9. Pursua	int to the provis	sions of Sections 608.416 a Istered agent, or both, in the	nd 608.508	Florida Statute	es, the al	pove-named limited	I liability company a	FL submits this state	ment for the	ne purpose of changing
		accept the obligations.	3(8(80) 110)	iga. Such Chan	ye was a	umonzeo by amine	alive vote of a majori	ny or the moniber	3. 111010Dy	иссерсине аррения
SIGNATU	RE	(Registered Agent Accepting A	poordoron) (N	OTE Bouistered Au	ent signatur	e required whon reinstation	g)	DATE		
10. Title	Ma	naging Members/Managers				ess Street Address	×	City, State and Zip Code		
MOR GRAHAM, JEGOL E			369-N-NEW-YORK AVE			***************************************	-WINTER-PARK-FI-			
MGR	DOOLITI	rle, DEAN		880 S. PLEASANTBURG I			DRIVE	VE GREENVILLE, SC		
MGR	TUCK, J	JR., N. BARTON		880 S. PLEASANTBURG D			RIVE GREENVILLE, SC			
MGR	PARKER, STEVEN A. 250 OARK AVENUE SOU			enue so uth		WINTER I	PARK,	FL		
ts:								Q.CU	an 0/97	,
11 Idaha	rahu eartifu that	the information cumplied wit	h thie filing d	oes ool qualify!	iorthe ev	emotion stated in Sc	ection 119.07(3) (i)	Florida Statutes	, lifumber ce	artify 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.

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SIG	N.	ATL	JRE	

5-/-97 864-255-4654

Date Dayline Proce #