


**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>FILED</b>  97 MAR 31 AM 7:29  SECRETARY OF STATE TALLAHASSEE, FLORIDA
<b>FILING FEE</b> \$203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
<b>1. Name and Mailing Address of Limited Liability Company</b>  SEGERA RANCH L.C. 9922 WALZER WAY WINDERMERE FL 34786		<b>DOCUMENT #</b> L96000001352  <b>1a. Principal Place of Business Address</b> 9922-Walzer-Way-- 9922 Lake Louise Drive WINDERMERE FL 34786 <i>MWB</i>	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
<b>2. Principal Place of Business</b>  Suite, Apt. #, etc.  City & State  Zip Country		<b>2a. Mailing Address</b> 9922 Lake Louise Dr.  Suite, Apt. #, etc.  City & State Windermere, FL  Zip Country 34786	
		<b>3. Date Organized or Qualified</b> 12/30/1996	<b>3a. State of Formation</b> FL
		<b>4. FEI Number</b>	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		<b>5. Date of Last Report</b>	<b>6. Certificate of Status Desired</b> \$8.75 Additional Fee Required <input type="checkbox"/>
<b>7. Name and Address of Current Registered Agent</b>  MARDER, MICHAEL GREENSPOON, MARDER ETAL. 135 W CENTRAL BLVD, SUITE 1100 ORLANDO FL 32801		<b>8. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  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>			
<b>SIGNATURE</b> _____		<b>DATE</b> _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
<b>10. Title</b>	<b>Managing Members/Managers</b>	<b>Business Street Address</b>	<b>City, State and Zip Code</b>
MGR	RUGGIERI, JOHN	9922-Walzer-Way-- 9922 Lake Louise Drive	WINDERMERE FL 34786
500002130655--5 -04/01/97--01107--011 ****203.75 ****203.75			
<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) (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.</b>			
<b>SIGNATURE:</b> <i>John Ruggieri</i>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date	Daytime Phone #