

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY 15 AM 10:07

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------

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 # L96000001358 COMMONS FLORIDA I, L.C. 1325 W. COLONIAL DRIVE SUITE 200 ORLANDO FL 32804

1a. Principal Place of Business Address 1325 W. COLONIAL DRIVE SUITE 200 ORLANDO FL 32804

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	2a. Mailing Address Suite, Apt. #, etc. City & State Zip	3. Date Organized or Qualified 12/31/1996	3a. State of Formation FL
------------------------------------------------------------------------------	-------------------------------------------------------------------	----------------------------------------------	------------------------------

4. FEI Number 59-3434449	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report 02/28/1997	6. Certificate of Status Desired SB 79 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent KANAN, BRADFORD S 1325 W. COLONIAL DRIVE SUITE 200 ORLANDO FL 32804

8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City	200002528492-6 -05/19/98--01024--014 ***128 pgs *** \$188.75 FL
-------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------

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) (NOTE Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	COMMONS MEDICAL DEVELO	1325 W. COLONIAL DR., SUIT	ORLANDO FL
MGR	Kanan Family LTD	" "	"
MEM	Bradford Kanan	" "	"
MEM	Rhonda Kanan	" "	"

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.

SIGNATURE: Joseph Zella Date: 2/24/98 Daytime Phone #: 407-425-2454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER