

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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L96000001360		1a. Principal Place of Business Address 2727 Ulmerton Road, Suite 330 Clearwater, FL 33762	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 12/30/96 3a. State of Formation FL 4. FEI Number 59-346398 ☐ Applied For ☐ Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$0.75 Additional Fee Required ☐	
7. Name and Address of Current Registered Agent Ottinger, David J. 911 Chesnut Street Clearwater, FL 34617-1368		8. Name and Address of New Registered Agent Name Roger Watts Street Address (P.O. Box Number is Not Acceptable) SANDPIPER SECURITIES, LLC Suite, Apt. #, etc. 2727 Ulmerton Road, Suite 330 City Clearwater FL Zip Code 33762			
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 <u>R. Watts</u> DATE <u>4/8/97</u> (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	Roger Watts	2727 Ulmerton Road, Suite 330		Clearwater, FL 33762	
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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: <u>R. Watts</u> <u>ROGER WATTS</u> <u>4/8/97</u> <u>(813) 572-6666</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone					