


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

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1998</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	<b>FILED</b> <i>4/20</i> <b>98 APR 17 PM 2: 26</b>  SECRETARY OF STATE TALLAHASSEE FLORIDA	
<b>FILING FEE</b> <b>\$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>		
1. Name and Mailing Address of Limited Liability Company  <b>BRUTON, L.L.C.</b> <b>13005 SAN ANTONIO WOODS LANE</b> <b>ORLANDO FL 32824</b>		<b>DOCUMENT #</b> <b>L97000000025</b>  1a. Principal Place of Business Address  <b>13005 SAN ANTONIO WOODS LANE</b> <b>ORLANDO FL 32824</b>		
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 <b>01/06/1997</b>  3a. State of Formation <b>FL</b>  4. FEI Number <b>31-1493447</b>  5. Date of Last Report  6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable  <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent  <b>HENRIQUEZ, ANTONIO</b> <b>13005 SAN ANTONIO WOODS LANE</b> <b>ORLANDO FL 32824</b>		8. Name and Address of New Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable) <b>100002496981--7</b> Suite, Apt. #, etc. <b>-04/22/98--01092--022</b> <b>****188.75 ****188.75</b> City <b>FL</b> 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 <b>4/10/98</b>		
(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	HENRIQUEZ, ANTONIO	13005 SAN ANTONIO WOODS LA	ORLANDO FL	
MGR	YORK, BRUCE	15 HOLLIDAY DRIVE	COLLINSVILLE IL	
<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>				
SIGNATURE: _____		DATE <b>4/10/98</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date      Daytime Phone #		