| File on subject | or before May 1, 1998 o | or Limite E. | d Liability | Com | pany wiil be | • | | أري | | |
|---|--|---------------------|---|---|--------------------|--|------------------------------------|------------------------|--------------------------|--|
| ANNUAL REPORT | | | Sandra Secr | LORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State | | | FILED | | | |
| 1998 DIVISION OF CORPORATIONS | | | | | | 98 MAR 16 PM 4: 00 | | | | |
| Make Check Payable To: FLORIDA DEPARTMENT OF STATE | | | | | | SECTION OF STATE | | | | |
| 1. Name | | | T# L970 | | | | 1 | | / . | |
| 10700 S.W. GREENRIDGE LANE PALM CITY FL 34990 | | | | | | 1a. Principal Place of Business Address 10700 S.W. GREENRIDGE LANE PALM CITY FL 34990 | | | | |
| Principal Place of Business | | | illing Address | ng Address | | | ed or Qualified | 3a. State of Formation | | |
| Suite, April # etc. Suite, April | | | A- | Maic A | | | 997 | FL | | |
| City & State City & Ste | | | State | ite | | | 4. FEI Number 65-6722390 | | | |
| Zip | Country | Zip | | Countr | у | 5. Date of Last F | Report | | ficate of Status Desired | |
| 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/O | | | | | | | | | ent/Office | |
| WALKER, BRYANT H 10700 S.W. GREENRIDGE LANE PALM CITY FL 34990 | | | | S | | | P.O. Box Number is Not Acceptable) | | | |
| PATIM | CITI FL 34990 | | Sulte, Apt. #, etc. | | -03/19/9801112029_ | | | | | |
| | | | City | | | ****1} % p.cp G p ****188.75 | | | | |
| its register | int to the provisions of Sections 608.4 red office or registered agent, or both, in red agent, and accept the obligations. | | | | | | | | | |
| SIGNATU | RE | | | | | | DATE | | | |
| 10, Title | Managing Members/Mana | (NOTE Hogislered Ag | DTE Registered Agent algorature required when reinstating) Business Street Address | | | City, State and Zip Code | | | | |
| MGR | HIS PROPERTIES, INC. | | 10700 | 10700 S.W. GREENRI | | | PALM (| CITY | FL | |
| MGR | HIS CARE & REPA | R, IN | 10700 | s.w. | . GREENRI | DGE LANE | PALM (| CITY | FL | |
| MGR | WALKER, BRYANT I | 10700 | 10700 S.W. GREENRIDGE | | | PALM (| CITY | FL | | |
| MGR | GR HARTMAN, ERIC R | | | 813 S.W. RIVER COURT | | | PALM (| CITY | FL | |
| | | | | | | : | a | L 2-1 | M | |

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. Ifurther 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:

MATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

HUKER 3/7/98 SC