
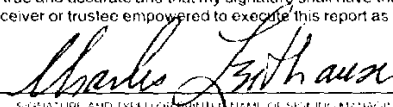


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR 11 AM 10:58	
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 PILGRIM PARTNERS, L.C. 4649 VAN KLEECK DRIVE NEW SMYRNA BEACH FL 32169		DOCUMENT # L97000000237		1a. Principal Place of Business Address 4649 VAN KLEECK DRIVE NEW SMYRNA BEACH FL 32169	
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 02/24/1997 3a. State of Formation FL 4. FEI Number 59-3134375 APPLIED FOR <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report 03/11/1998 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent LEITHAUSER, CHARLES 4649 VAN KLEECK DRIVE NEW SMYRNA BEACH FL 32169		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City 000002806300-0 -03/15/99 -01120-022 ****188.75 ****188.75 FL Zip Code			
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 _____			
10. Title Managing Members/Managers Business Street Address City, State and Zip Code					
MGRM LEITHAUSER, CHARLES		4649 VAN KLEECK DRIVE		NEW SMYRNA BEACH FL	
MGRM BRYDON ER, TOM		674 INVERNESS CT		NEW SMYRNA BEACH FL	
MGRM DYER, ANDREW		2297 S GLENCOE RD.		NEW SMYRNA BEACH FL	
MGRM GROLL, MARVIN		837 SAWGRASS LANE		NEW SMYRNA BEACH FL	
MGRM HALLER, MAT		BOX 4146		STANFORD CT	
MGRM ABROW, IRVING		76 STONELEDGE CT.		LITTLE SILVER NJ	
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: 		2/20/99			