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 Secretary of State DIVISION OF CORPORATIONS							FILED		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee							99 FEB 19 PM 3: 27		
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE  1. Name and Malling Address DOCLIMENT # 1.97.000(103.44)							SeCheTARY OF STATE		
1. Name and Malling Address of Limited Liability Company DOCUMENT # L97000000244							TALLAHASSEE, FLORIDA  1a. Principal Place of Business Address		
G & M OF MONTICELLO, L.C. 240 W WASHINGTON ST MONTICELLO FL 32344							240 W WASHINGTON ST MONTICELLO FL 32344		
2 Princip	siness	2a. Maili	g Address			3. Date Organiz	ed or Qualified	3a. State of Formation	
Suite, Apt.	# etc	Suite An	Suite, Apt. #, etc.			02/28/	1997	FL	
City & Stat	_		City & State			4. FEI Number	1-1764 D FOR	A78 Applied For Not Applicable	
Žip Country			Zip	Z <sub>ID</sub> Country			5. Date of Last f		6. Certificate of Status Desired
						<u> </u>	02/26/	1998	\$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent 8. Name							Name and Address of New Registered Agent/Office		
240	ORGE W INGTON FL 32:	_ = =		Street Address (P		P.O. Box Number is Not Acceptable)			
110111	111 02.	· ·		Sulle, Apt. #, etc.					
				City			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									
10. Title	Ma	ers/Managers	Business Street Address			City, State and Zip Code			
MGRM	MILLE	R, GEO	RGE W	240 W WASHINGTON			ST MONTICELLO FL		
MEM	GEORG	IADIS,	GEORGE	1195 E PEARL ST			MONTICELLO FL		
							₹ (	- 112728 *****	781815,517 1 179901118023 88 75 ****188,75 12499
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. If urther 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 eath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute that report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.									
SIGNATURE: 2/18/99 550-552-2646 SKHATURE AND THIRD OR FHITHED FLAME OF SIGNING MANIAGING MANIAGER Date: Dayland From #									

INHSE (0 R (12-98)