File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT Secretary of State 1999 99 APR 20 AMII: 45 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT #** 197000000248 1a. Principal Place of Business Address MATHEWS WINTER HAVEN INVESTMENTS, L.C. 30 CLUB CT 30 CLUB CT HAINES CITY FL 33844 HAINES CITY FL 33844 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 02/24/1997 FLSuite, Apt. #, etc Suite, Apt #, etc 4. FEI Number Applied For City & State City & State 59-3500715 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Žιρ Ζφ Country Country \$8.75 Additional Fee Required 04/13/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office MATTHEWS, EDWARD D 30 CLUB CT Street Andre HAINES CITY FL 33844 Suite, Apt. #, etc. City 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE \_\_\_\_\_ DATE (Hogstered Agent Accepting Aspenith unit). (NOTE: Heystered A per signation in grant when receiving 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code MATHEW, EDWARD D MGRM 30 CLUB CT HAINES CITY FL MGRM MATHEWS, CHARLES A 30 CLUB CT HAINES CITY FL 500002853135~ -04/27/39--01052--003 \*\*\*\*188.75

11. Ido hereby certify that the information supplied with this filling 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

Tema EDWARD D. MATHEWS

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attachment with an address.

SIGNATURE: <