File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE SECTOMENT OF STORY FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 HAY -3 IM 8: 32 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 #** 19700000374 1a. Principal Place of Business Address TAYLOR CREEK HOLDINGS, L.C P.O. BOX 220461 P.O. BOX 220461 CHARLOTTE NC 28222 CHARLOTTE NC 28222 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 2 Principal Place of Business 04/01/1997 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 58-2328986 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zip Country \$8.75 Additional Fee Required 04/06/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name ABERNETHY, BRUCE R JR 900 VIRGINIA AVE Street Address (P.O. Box Number is Not Acceptable) SUITE 6 FORT PIERCE FL 34982 Suite, Apl. #, etc. Zip Code City 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 (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required wher revistalitie) **Business Street Address** City, State and Zip Code 10. Title Managing Members/Managers HOLLAND CONSTRUCTION C P.O. BOX 220461 N/A CHARLOTTE NC MGR 800002868758----05/07/39--01162--015 ****188.75 ****188.75

SIGNATURE: HALVA PRES. 04 -28-99 784-846-700 SIGNATURE: SIGNATURE OF THE OFFICE OF THE

Ko, INC. MGR.

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