


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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  99 APR -2 PM 1:43	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L97000000438</b>  WATERWAY POINTE, L.C. 5870 MERLE HAY ROAD P.O. BOX 394 JOHNSTON IA 50131		1a. Principal Place of Business Address  5870 MERLE HAY ROAD P.O. BOX 394 JOHNSTON IA 50131			
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 04/23/1997  3a. State of Formation FL  4. FEI Number 59-3482109 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 04/03/1998		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent  BRUNER, DAVID E 1645 LUDLOW ROAD MARCO ISLAND FL 34145			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 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. I hereby accept the appointment as registered agent, and accept the obligations.			SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (FEE) (Registered Agent Signature and Filing Fee)</small>		
10. Title Managing Members/Managers		Business Street Address		City, State and Zip Code	
MGRM WE LEASE L.C., MGRM DRESCHER, UWE MGRM KLEIN, MICHAEL		5870 MERLE HAY RD, PO BOX 1130 VERNON PLACE 1130 VERNON PLACE		JOHNSTON IA MARCO ISLAND FL MARCO ISLAND FL	
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: WE LEASE L.C. BY <u>Jeffrey L. Charlson, TREASURER</u> 02/26/99 515-253-0743 <small>SIGNATURE AND TITLE OF OFFICER OR MANAGER OF COMPANY OR MEMBER OF COMPANY</small> JEFFREY L CHARLSON					