


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAY -8 PM 3:28	
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		DOCUMENT # L97000000470				1a. Principal Place of Business Address	
EASTERN INDOOR SOCCER LEAGUE, L.C. 3370 CAPITAL CIRCLE N.E. SUITE C-2 TALLAHASSEE FL 32308						3370 CAPITAL CIRCLE N.E. SUITE C-2 TALLAHASSEE FL 32308	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified		3a. State of Formation	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/01/1997		FL	
City & State		City & State		4. FEI Number		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip		Zip		59-3448973			
Country		Country		5. Date of Last Report		6. Certificate of Status Desired	
				N/A		SB 75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office			
MILLER, TRAVIS L 106 EAST COLLEGE AVENUE SUITE 1200 TALLAHASSEE FL 32301				Name Street Address (P.O. Box Number is Not Acceptable) 800002522568--3 Suite, Apt. #, etc. -05/14/98--01002--011 ****188.75 ****188.75 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 _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when resigning)</small>							
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code			
MGRM	SAVANNAH PROFESSIONAL	1407 W. 31ST AVE. 7TH FLOOR		ANCHORAGE AL			
MGRM	HOUND DOG SPORTS GRO,	375 E. MAIN ST TUPELO		TUPELO MS			
MGRM	LAFAYETTE SOCCER, L.L.	413 TRAVIS STREET		LAFAYETTE LA			
MGRM	THE TALLAHASSEE SCOR,	505 W PENSACOLA ST SUITE 1		TALLAHASSEE FL			
MGRM	DAYTONA BEACH PROFES,	222 S PENINSULA DR		DAYTONA BEACH FL			
MGRM	COLUMBUS SOCCER, L.L.C	1004 BROADWAY SUITE 210		COLUMBUS GA			
MGRM	MAJOR LEAGUE INDOOR FOOTBALL, INC.	2106 DREW ST, SUITE 103		CLEARWATER, 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: _____

SIGNATURE AND TYPE (PRINT) NAME OF SIGNING MANAGING MEMBER OR MANAGER

19/08m Tasha Scarpioni 5/1/98 (P88) 224-7700