


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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		FILED 98 JUN -5 AM 9:16 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 # L97000000509		1a. Principal Place of Business Address	
RCH ASSET MANAGEMENT, L.C. 4519 JOHN AVE. DESTIN FL 32541 <i>SM</i>		<i>98-AB</i> <i>CM</i>		4519 JOHN AVE. DESTIN FL 32541	
2. Principal Place of Business <i>4519 John Ave</i>		2a. Mailing Address		3. Date Organized or Qualified <i>05/08/1997</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation <b>FL</b>	
City & State <i>Destin FL</i>		City & State		4. FEI Number <i>62-1697968</i>	
Zip <i>32541</i>		Country <i>U.S.A.</i>		5. Date of Last Report	
				6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
VARGO, HAZEL E 4519 JOHN AVE. DESTIN FL 32541				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				Suite, Apt. #, etc.	
				City	
				<b>FL</b>	
				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) (NOT: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	VARGO, HAZEL E	4519 JOHN AVE.		DESTIN FL	
MGRM	VARGO, CAROLE L	4519 JOHN AVE.		DESTIN FL	
MGRM	VARGO, ROBERT F	109 DUNHILL DR.		HUNTSVILLE AL	
200002561122-7 -06/16/98-01087-002 ****188.75 ****188.75					

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:

*Robert F. Vargo, MGRM*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

*04/28/98* *256-464-9549*  
Date Deadline Phone #