


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 SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR 27 PM 1:39 <i>mtu</i> 4/28	
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 # L97000000559		1a. Principal Place of Business Address  711 BALLARD STREET ALTAMONTE SPRINGS FL 32701	
HYPERTHINK MULTIMEDIA DESIGN, L.L.C. 711 BALLARD STREET ALTAMONTE SPRINGS FL 32701					
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/19/1997	
City & State		City & State		FL	
Zip		Country		4. FEI Number 59-3379279	
				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			
LILLIS, MICHAEL J 711 BALLARD STREET ALTAMONTE SPRINGS FL 32701		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City			
		700002508607--B -05/04/98--01006--014 ****188.75 FL			
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 reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	BROSEHART, CHARLES	3309 HARRISON STREET		ORLANDO FL	
MGRM	STOCKBRIDGE, MARK	1064 SOPHIE BOULEVARD		ORLANDO FL	
MGRM	DELISLE, TIMOTHY	708 PINE TERRACE CT.		ALTAMONTE SPRINGS FL	
MGRM	LILLIS, MICHAEL J	3042 EAGLET LOOP		ORLANDO 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: <i>Michael J. Lillis</i>		4/21/98		(407) 831-5131	
SIGNATURE AND TYPE IN PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Display Phone #	