File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY -1 PM 2: 22 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SEGRETARY OF STATE TALLAHASSEE, FLORIDA \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address
of Limited Liability Company **DOCUMENT #** L97000000572 1a. Principal Place of Business Address VISION REAL ESTATE, L.C. 3625 WEST STATE ROAD 46 3625 WEST STATE ROAD 46 UNIT 2 UNIT 2 SANFORD FL SANFORD FL 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business P.O. Box 471057 05/23/1997 Suite, Apt. #, etc. Suite, Apt. #, etc. 59-35004 City & State City & State Not Applicable Lake Monroe, FL 5. Date of Last Report 6. Certificate of Status Desired Zio Country \$8.75 Additional Fee Required 32747-1057 USA USA 32771 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent HARRISON, CHARLES R ESQ. 1400 WEST FAIRBANKS AVENUE Street Address (P.O. Box Number is Not Acceptable) SUITE 203 Suite, Apt. #, etc. WINTER PARK FL City Zip Code 111 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 when reinstaint) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MEM LAMPHIER, CLARENCE J 2160 MONTECITO AVE DELTONA FL MEM LAMPHIER, GARY M 2349 RIVER TREE CIRCLE SANFORD FL MEM LAMPHIER, ROBERT W 3164 TUNISIA DRIVE DELTONA FL 100002520261---05/12/98--01048--018 ****197.50 ****197.50 11. Ido hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual report is true and accurate and that my squature 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 pusted empowered to execute his report as required by Chapter 608, Florida Statutes; and that my name appears in Biock 10, or on an

attachment with an address.

SIGNATURE