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

ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

## FILED

FILING FEE		199	8	THE PARTY	DIVISION	OF COR	PORATIONS		98 AP	R 10 PHII: 25	
Ta. Principal Place of Business Address   Ad	\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE  1. Name and Malling Address  DOCUMENT #										
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.	KISKADEE, L.C. P.O. BOX 13606							4415 ELECTRIC RD.			
Applied For	Principal Place of Business     2a. Mailing Address							3. Date Organiz	ed or Qualified	3a. State of Formation	
Zip Country  Zip Country  5. Date of Last Report  6. Detect Last Report  7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered Agent/Office  Name  CORPORATION SERVICE , COMPANY  1201 HAYS STREET  TALLAHASSEE FL 32301  Suite, Apt. #, etc.  City  Lip Code  City  Lip Code  The Desired Agent Acceptable  Suite, Apt. #, etc.  Side, Apt. #, etc.  City  Lip Code  The Desired Agent Acceptable  Suite, Apt. #, etc.  City  Lip Code  The Desired Agent Acceptable  To Title Managing Members/Managers  MGR DECHOW, GERALD A  P.O. BOX 13606  ROANOKE VA  SUID COUNTRY  Street Address  City, State and Zip Code  ROANOKE VA  SUID COLOR TO THE Agent Acceptage Agent A	Suite, Apt. #, etc. Suite, Ap				ł. #, etc.			06/06/1997 4. FEI Number		FI Applied For	
7. Name and Address of Current Registered Agent  7. Name and Address of Current Registered Agent  8. Name and Address of New Registered Agent/Office  Name  CORPORATION SERVICE , COMPANY 1201 HAYS STREET  TALLAHASSEE FI 32301  Suite, Apt. #, etc.  City  City  Lip Code  FL  2ip Code  FL  Suite, Apt. #, etc.  City  FL  Incredit a decept the provisions of Sections 608 416 and 608 508. Fiorida Statutes, the above-named limited liability company submits this statement for the purpose of change as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Agrent Agrent Agrent agrentice required after registered Agent agrenture required after registered Agent Address  DATE  (Registered Agent Agrent	City & State			City & Sta	City & State			50-2337198		Not Applicable	
Name  CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  Sufe, Apt. #, etc.  City  Lip Code  Pursuent 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 chang its registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointm as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Accepting Agreement (NOTE Registered Agent Agent adjustment registed when refinalisting)  DATE  DATE  DATE  DATE  OR DECHOW, GERALD A  P.O. BOX 13606  ROANOKE VA  SOURCE 4883229—  -04.414/93—01062—005  *******188.75  ******188.75	Zip	Zip Country Zip		Ζιρ	Coun		ry	5. Date of Last Report		Certificate of Status Desired     S8.75 Additional Fee Required	
Name  CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  Sufe, Apt. #, etc.  City  Lip Code  Pursuent 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 chang its registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointm as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Accepting Agreement (NOTE Registered Agent Agent adjustment registed when refinalisting)  DATE  DATE  DATE  DATE  OR DECHOW, GERALD A  P.O. BOX 13606  ROANOKE VA  SOURCE 4883229—  -04.414/93—01062—005  *******188.75  ******188.75	<b> </b>	and Address of Current	Agont		1	lama and Addres	a of New Cools	tored to entitle			
1201 HAYS STREET TALLAHASSEE FL 32301  Suite, Apt. #, etc.  City  FL  Zip Code  P. 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 change the 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 appointm as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Accepting Agreement (NOTE Registered Agent algorithm required when reinstating)  DATE  10. Title  Managing Members/Managers  Business Street Address  City, State and Zip Code  MGR  DECHOW, GERALD A  P.O. BOX 13606  ROANOKE VA  SIGNATURE											
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 change its registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Accepting Agreement) (NOTE Registered Agent signature required when reinstating)  DATE  (Registered Agent Accepting Agreement)  (NOTE Registered Agent Address  Business Street Address  City, State and Zip Code  MGR  DECHOW, GERALD A  P.O. BOX 13606  ROANOKE VA  900024882239  -04/14/9301062005 ******188.75  ******188.	1201 HAYS STREET					Street Address (P.O. Box Number is			is Not Acceptab	ole)	
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 chang its registered agont, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointm as registered agent, and accept the obligations.  SIGNATURE					Suite, Apt. #, etc.						
Its registered affice 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 appointm as registered agent, and accept the obligations.  SIGNATURE  (Registered Agent Accepting Agreement) (NOTE Registered Agent signature required when reinstating)  10. Title Managing Members/Managers Business Street Address City, State and Zip Code  MGR DECHOW, GERALD A P.O. BOX 13606  ROANOKE VA  SIGNATURE  (Registered Agent Accepting Agreement) (NOTE Registered Agent signature required when reinstating)  The property of the members. I hereby accept the appointm as registered agent, and accept the appointment agent							City	·			
10. Title Managing Members/Managers Business Street Address City, State and Zip Code  MGR DECHOW, GERALD A P.O. BOX 13606 ROANOKE VA  SOCIOLATE SERVICE SERVIC	9. Pursuant to the provisions of Sections 608.416 and 608.508, Fiorida 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.										
MGR DECHOW, GERALD A P.O. BOX 13606 ROANOKE VA  90002488229— -04/14/9801062005 *****188.75 *****188.	SIGNATURE										
90002488229	10. Title					Business Street Address			City, State and Z		
90002488229											
-04/14/9801062005 ****188.75 ****188.	MGR	DECHO	, GERALD A		P.O.	вох	13606		ROANOF	KE VA	
? AL APR 1 3 1999								90	04/14	79801062005	
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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. If urther 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 trusted 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:

Gerald A. Dechow, MGR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

4/06/98

(540) 774-8800 Daytimo Phone #

Date