

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 22 PM 2:08

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L97000000618

KISKADEE, L.C.
~~P.O. BOX 13606~~
~~ROANOKE VA 24035~~

1a. Principal Place of Business Address
~~4415 ELECTRIC RD.~~
~~ROANOKE VA 24014~~

2. Principal Place of Business 3400 S. TAMiami TRAIL Suite, Apt. #, etc Suite 301 City & State Sarasota, FL Zip 34239 Country USA		2a. Mailing Address 3400 S. TAMiami TRAIL Suite, Apt. #, etc Suite 301 City & State SARASOTA, FL Zip 34239 Country USA		3. Date Organized or Qualified 06/06/1997	3a. State of Formation FL
				4. FEI Number 58-2337193 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	5. Date of Last Report 04/10/1998
				6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	

7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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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 _____
(Registered Agent Accepting Appointment) (If Not Registered Agent, sign and return with letter of appointment)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	DECHOW, GERALD A	P.O. BOX 13606 3400 S. TAMiami TRAIL Suite 301	ROANOKE VA SARASOTA, FL 34239

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****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: 4/7/99 941-306-2749