Flie on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY 🍂 Sandra 📆 Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 JUN -8 AMII: 55 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L97000000643 1a. Principal Place of Business Address BENEDICT REALTY II, LLC 765 JOHN RINGLING BLVD. #C38 765 JOHN RINGLING BLVD. #C38 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 65-0785792 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country St 75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office GIOVANUCCI, ALDO Street Address (P.O. Box Number is Not Acceptable) 765 JOHN RINGLING BLVD. #C38 SARASOTA FL 34236 Suite, Apt. #, etc. City 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 oxanging 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. 10. Title Managing Members/Managers Business Street Address City, State and Zip Code MGR MANGONE FAMILLY PARTNE 765 JOHN RINGLING BLVD. #C SARASOTA FE GIOVANUCCI FAMILY PART 765 JOHN RINGLING BLVD. #C SARASOTA FL MGR 40<mark>0002557424---</mark> -06/11/98--01114--006

11. Ido 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 it 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

STRATURE AND TYPE FOR PRINCED NAME OF STRING MANAGING MEMBER OF MANAGE

4/13/98

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