

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
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 27 PM 4:13

#4/28

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 # L97000000671

APOLLO AFFILIATES (FLORIDA), L.L.C.
P. O. BOX 14036
GAINESVILLE FL 32604-2036

1a. Principal Place of Business Address

3181 NW 13TH ST.
GAINESVILLE FL 32609

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

06/17/1997

FL

4. FEI Number

☐ Applied For

☐ Not Applicable

59-3452928

5. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

~~WARD, -PETER-H-~~
~~1001-NEWBERRY-RD, -SUITE-C-1-~~
~~GAINESVILLE-FL-32607~~

Name

Gary M. Kelley

Street Address (P.O. Box Number is Not Acceptable)

7833 Northwest 20th Drive

Suite, Apt. #, etc.

City

Gainesville

FL

Zip Code

32653

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 reinstating)

DATE 04/20/98

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM KELLEY, GARY M

3181 NORTHWEST 13TH ST.

GAINESVILLE FL

~~MGRM WBS ACQUISITION CORP, -P. O. BOX 14036-~~

~~GAINESVILLE FL~~

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****188.75 ****188.75

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:

Managing Member

04/20/98

352/371-0622

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

Date

Daytime Phone #