


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	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # L97000000673	
MEEKS & MANN, L.C. 6950 NW 87TH PLACE CHIEFLAND FL 32644		1a. Principal Place of Business Address 2227 N. Young Blvd. 6950 NW 87TH PLACE CHIEFLAND FL 32644	
2. Principal Place of Business <u>2227 N. Young Blvd.</u> Suite, Apt. #, etc.	2a. Mailing Address <u>P.O. Box 465</u> Suite, Apt. #, etc.	3. Date Organized or Qualified <u>06/20/1997</u>	3a. State of Formation <u>FL</u>
City & State <u>Chiefland, FL</u>	City & State <u>Chiefland, FL</u>	4. FEI Number	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
Zip <u>32646</u>	Country <u>USA</u>	5. Date of Last Report	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent MANN, LOY A 6950 NW 87TH PLACE CHIEFLAND FL 32644		8. Name and Address of New Registered Agent/Office Name <u>David Meeks Jr.</u> Street Address (P.O. Box Number is Not Acceptable) <u>2227 N. Young Blvd.</u> Suite, Apt. #, etc. City <u>Chiefland, FL</u> Zip Code <u>32646</u>	
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 <u>David W. Meeks Jr.</u> DATE <u>3/5/98</u> <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	MEEKS, DAVID W JR	2224 N YOUNG BLVD	CHIEFLAND FL
MGR	MANN, LOY A	6950 NW 87TH PLACE	CHIEFLAND FL

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: David W. Meeks Jr. David W. Meeks Jr. 3/5/98 352 4934958
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #