## 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



## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS 98 JUN 22 AM 8: 58

FILED

1998 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company

**DOCUMENT #** 

L97000000726

506 45TH STREET SUITE B-5

1a. Principal Place of Business Address

BANANA RIVER INVESTORS, L.L.C. 506 45TH STREET SUITE B-5

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST.				Address (P.O. Box Number is Not Acc	eptable)
7. Name and Address of Current Registered Agent				Name and Address of New Registered Agent/Office  Name	
Zip	Country	Zip	Country	5. Date of Last Report	6. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State		58-23264	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #. etc.		07/03/1997 FI.	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified 3a. State of Formation	
COLUMBUS GA 31904				COLOMBOS GA 31904	

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.

City

Suite, Apt. #, etc.

Kent Cost MGR DATE SIGNATURE\_ Agent Accepting Appointment) (NOTE, Registered Agent sign

Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title COST, KENT 506 45TH STREET, SUITE B-5 COLUMBUS GA MGR 700002570257---5 -06/23/98--01105--009 \*\*\*\*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 truster ampowered 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:

STE. 1

TALLAHASSEE FL 32301

STALL EVELO OR PRINTED NAME OF SIGNING MANAGING MEMBERCHE MANAGER