

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 <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**

98 APR 10 PM 11:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>FILING FEE</b> \$ 188.75	<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	<b>DOCUMENT #</b> L97000001055
BELVEDERE DEVELOPMENT, L.C. 3204 BAY TO BAY BLVD. TAMPA FL 33629	

1a. Principal Place of Business Address  3204 BAY TO BAY BLVD. TAMPA FL 33629
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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 09/12/1997	3a. State of Formation FL
4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent  MANGIONE, RALPH P ESQ. ONE TAMPA CITY CENTER 201 N. FRANKLIN STREET, SUITE 2600 TAMPA FL 33602
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8. Name and Address of New Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code <b>FL</b>

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 *[Signature]* DATE 3/19/98  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BARDIN, JEFFREY	3030 N. ROCKY POINT DRIVE	TAMPA FL
MGRM	SCHMALHORST, LAURA	3204 BAY TO BAY BLVD.	TAMPA FL
MGRM	SCHMALHORST, STEVE	3204 BAY TO BAY BLVD.	TAMPA FL

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\*\*\*188.75 \*\*\*188.75  
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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: *[Signature]* DATE: 3/19/98  
SIGNATURE AND TYPE OF OFFICIAL AND NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #