File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 1970 113 111 bi 20 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT #** 197000001181 Name and Mailing Address of Limited Liability Company POWELL & POWELL ENTERPRISES, LLC 1a. Principal Place of Business Address 5420 HALTATA COURT 9111 LITTLE ROAD NEW PORT RICHEY FL 34655 NEW PORT RICHEY FL 34654 3. Date Organized or Qualified 2 Principal Place of Business 2a. Mailing Address 3a. State of Formation 10/23/1997 FT. Suite, Apt. #, etc. Suite Ant # etc. 4. FEI Number Applied For 59-3473790 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Country 08/24/1998 \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent Name WALTER'S ACCOUNTING & TAX SERVICE. 4209 LITTLE ROAD Street Address (P.O. Box Number is Not Acceptable) NEW PORT RICHEY FL 34655 Suite, Apl. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE \_\_\_ DATE (Big Sensi Agent A copying Applications). (NOTE His potential Agent's gratical testing of which one state jit 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR POWELL, JENNIFER J 5420 HALTATA COURT NEW PORT RICHEY FL 300002789143--8 -02/26/39-01034-023 \*\*\*\*188.75 \*\*\*\*188.75 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. If urther 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.

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