




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		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAR 16 PM 1:40	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
1. Name and Mailing Address of Limited Liability Company		<b>DOCUMENT #</b> L97000001241		1a. Principal Place of Business Address	
SUNMAID SITE SELECTION, LLC 1634 MAIN STREET SARASOTA FL 34236				1634 MAIN STREET SARASOTA FL 34236	
2. Principal Place of Business 636 MARBURY LN Suite, Apt. #, etc.		2a. Mailing Address PO Box 3319 Suite, Apt. #, etc.		3. Date Organized or Qualified 11/06/1997	
City & State Longboat Key, FL		City & State SARASOTA FL		3a. State of Formation FL	
Zip 34228		Zip 34230		4. FEI Number 65-0796617	
Country USA		Country USA		5. Date of Last Report	
				6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
CORPORATION SERVICE, COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		Name JOHN CARSON Street Address (P.O. Box Number is Not Acceptable) 636 MARBURY LN Suite, Apt. #, etc. City Longboat Key FL Zip Code 34228			
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 				DATE 12 March 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	CARSON, WILLIAM J	636 MARBURY LANE		LONGBOAT KEY FL	
MGRM	CARSON, LYNN C	636 MARBURY LANE		LONGBOAT KEY FL	
				000002462630--1 -03/19/98--01112--015 ****188.75 ****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 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: 		Wm. John Carson		12 March 98 941-383-6876	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER		Date		Daytime Phone #	