File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAY - 1 PM 4: 09 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address
of Limited Liability Company **DOCUMENT #** L97000001253 1a. Principal Place of Business Address THE ALTUS GROUP, L.C. 2101 SOUTH WAVERLY PLACE 2101 SOUTH WAVERLY PLACE MELBOURNE FL 32901 MELBOURNE FL 32901 2. Principal Place of Business 2a. Malling Address 3. Date Organized or Qualified 3a. State of Formation 2101 S. WAVERLY PLACE 11/07/1997 4. FEI Number Suite, Apt. #, etc. SAME Applied For SUHE City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country NIA \$8.75 Additional Fee Bequired 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent A 1BR HON MORRIS WAYNE Street Address (P.O. Box Number is Not Acceptable) ALBRITTON, MORRIS WAYNE 2101 SOUTH WAVERLY PLACE MELBOURNE FL 32901 Zip Code 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 Elevida. 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. Registered Agent signature required when reinstating) 10. Title Managing Melfybers/Managers **Business Street Address** City, State and Zip Code HOLEMAN, VAUGHN DALE MGR 4545 DEERWOOD TRAIL MELBOURNE FL ALBRITTON, MORRIS WAYN 2511 GRAN TETON BLVD. MGR MELBOURNE FL Albritton, MORRIS WAYNE 500000251597 -05/07/98--01106--005 ****188.75 ****188.75 11. Ido hereb\sertify 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 of 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.