File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 MAR 16 PM 1:39 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 #** L98000000002 1a. Principal Place of Business Address SMITH & SAWYER, L.L. C. 200 CAMELIA COURT NORTH 200 CAMELIA COURT NORTH VERO BEACH FL 32963 VERO BEACH FL 32963 2. Principal Place of Business 3. Date Organized or Qualified 3a. State of Formation 12/31/1997 4. FEI Number FL Sulle, Apt. #, etc. Applied For City & State 65-0807962 Not Applicable BEACH 5. Date of Last Report 6. Certificate of Status Desired Zip Country usA 88.75 Additional Fee Beganist 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office SMITH, ROBERT L Street Address (P.O. Box Number is Not Acceptable) 200 CAMELIA COURT NORTH VERO BEACH FL 32963 200002451542 Sulte, Apt. #, etc. 03/19/98--01009--003 City 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited fiability 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 (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code

10. Title Managing Members/Managers Business Street Address City, State and Zip Code

MGR SMITH, ROBERT L 200 CAMELIA COURT NORTH VERO BEACH FL 32463

MGR SAWYER, PATRICA L 200 CAMELIA COURT NORTH VERO BEACH FL 32463

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. 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 AND TYPED OR PRINTED NAME OF SIGNING M

RUBERT L. DW. TH

3/2/98

(54) 234-058

Daytime Phone 6