

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILLED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 MAY -7 AM 11:07

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L98000000153**

M.E.P. GROUP FOUR, L.C.  
5100 W. KENNEDY BLVD., SUITE 425  
TAMPA FL 33609

1a. Principal Place of Business Address  
5100 W. KENNEDY BLVD., SUITE  
TAMPA FL 33609

2. Principal Place of Business **38615 Lansing Ave.**  
Suite, Apt. #, etc.

2a. Mailing Address **P.O. Box 2296**  
Suite, Apt. #, etc.

3. Date Organized or Qualified **02/05/1998** 3a. State of Formation **FL**

City & State **Zephyrhills, FL**  
Zip **33540** Country

City & State **Zephyrhills, FL**  
Zip **33539** Country

4. FEI Number **65-0813117**  
☐ Applied For  
☐ Not Applicable

5. Date of Last Report 6. Certificate of Status Desired  
☒ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent  
**MCCONIHAY, STEPHEN E**  
**5100 W. KENNEDY BLVD., SUITE 425**  
**TAMPA FL 33609**

8. Name and Address of New Registered Agent/Office  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
**38615 Lansing Ave.**  
Suite, Apt. #, etc.  
City **Zephyrhills** **FL** Zip Code **33540**

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 \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when changed agent)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	STEWART, HUGH	5100 W. KENNEDY BLVD., SUITE 425	TAMPA FL
MGR	GREGG, ALEX T	5100 W. KENNEDY BLVD., SUITE 425	TAMPA FL
MGR	GREGG, ALEX R	5100 W. KENNEDY BLVD., SUITE 425	TAMPA FL
MGR	WOODS, DANIEL	1859 PINE ISLAND ROAD	PLANTATION FL

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: Hugh Stewart 4-19-99 813-788-4373