


LIMITED LIABILITY COMPANY ANNUAL REPORT 1999


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

99 FEB 24 AM 9:55

STUDY OF THE
FALLS OF THE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000000335

1a. Principal Place of Business Address
2222 EDGEWOOD DRIVE SOUTH
LAKELAND FL 32803

3. Date Organized or Qualified 03/17/1998	3a. State of Formation FL
4. FEI Number 59-3498271	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$875 Additional Fee Required <input type="checkbox"/>

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

SIGNATURE / Demas Strickland III DATE 2/23/99
(Required Agent Signing Appointment) (R011) Registered Agent signature required when not at the

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MBR	STRICKLAND, JOHN THOMA	343 DAYTONA AVENUE	HOLLY HILL FL
MBR	STRICKLAND, DEBBIE JO	343 DAYTONA AVENUE	HOLLY HILL FL
	STRICKLAND, JOHN THOMA	6819 BROKEN ARROW TRAIL	LAKELAND FL
	STRICKLAND, DEBBIE JO	" " " "	" "
			800002800028-- -03/09/99--01091--003 ****188.75 ****188.7
			olcc

SIGNATURE: J. THOMAS STRICKLAND III 2/23/99 6446044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER MEMBERS OF COMMITTEE Date Digit # Print #