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

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

Name and Mailing Address of Limited Liability Company

Principal Place of Business

DOCUMENT # 198000000763

2a. Mailing Address

MARTIN SQUARE PROPERTIES, L.C. 3232 S.E. DIXIE HIGHWAY STUART FL 34997

FILED 99 MAR 17 AM 8: 14

3a. State of Formation

Stock that brother

1a. Principal Place of Business Address

3. Date Organized or Qualified

3232 S.E. DIXIE HIGHWAY STUART FL 34997

							.998	F.T			
Suite, Apt. #, etc. Su			Suite, Apt	uite, Apt. #, etc			4. FEI Number		l	Applied For	
City & State City			City & Sta	S State			65-0851473 Not Applicable				
Zio Country Z			Zip		Count	· · · · · · · · · · · · · · · · · · ·	5. Date of Last I	Report	6. Certificate of Status Desired		
Žip		Coorniy	24,	Couri		y			\$8 75 Additional Fee Required		
7. Name and Address of Current Registered Agent						8. Name and Address of New Registered Agent/Office					
MORGAN, JAMES C 3232 S.E. DIXIE HIGHWAY						Name Street Address (P.O. Box Number is Not Acceptable)					
STUART FL 34997											
					Suite, Apt. #, etc. 910002820239 97 93/26/9901068 917						
						****188.75 ****188.75 City 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 Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE											
10. Title				Business Street Address				City, State and Zrp Code			
MGRM	MORGAN, JAMES C 3232 S.E			S.E.	DIXIE HIGHWAY STUART FL						
, le						Sc 24-9	9				

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. If urther 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:

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