

subject to a \$ 400.00 LATE FEE.

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| LIMITED LIABILITY COMPANY ANNUAL REPORT 1998-9 | FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS |
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FILED

99 AUG -3 PM 2:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE \$ 188.75 Annual Report \$150.00 + \$38.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

| | |
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| 1. Name and Mailing Address of Limited Liability Company EIGHTEEN PRODUCTIONS, L.C. c/o JEANNE STRICKLAND 14515 San Pablo Dr. N. Jacksonville, FL 32224 | DOCUMENT # L98000000781 |
|--|-------------------------|

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| 2. Principal Place of Business 14515 San Pablo Dr. N. Suite, Apt. #, etc. City & State Jacksonville, FL 32224 Zip USA | 3a. Mailing Address SAME Suite, Apt. #, etc. City & State Zip Country |
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| 7. Name and Address of Current Registered Agent BRANDON FOWLER 9957 DOVETAIL COURT NORTH JACKSONVILLE, FL 32227 | 8. Name and Address of New Registered Agent/Office Name JEANNE STRICKLAND Street Address (P.O. Box Number is Not Acceptable) 14515 San Pablo Dr. N. Suite, Apt. #, etc. City Jacksonville, FL Zip Code FL 32224 |
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9. Pursuant to the provisions of Sections 606.410 and 606.800, 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 X Jeanne M Strickland DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when resigning)

| 10. Title | Managing Members/Managers | Business Street Address | City, State and Zip Code |
|------------|---------------------------|--|--------------------------|
| Co-Manager | JEANNE STRICKLAND | 14515 San Pablo Dr. N. Jacksonville, FL 32224 | Jacksonville, FL 32224 |
| Co-Manager | BRANDON FOWLER | 14515 San Pablo Dr. N. | Jacksonville, FL 32224 |

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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 606, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: X Jeanne M Strickland x (904) 223-6004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER (NO MEMBER OR MANAGER) Date Daytime Phone #

EIGHTEEN PRODUCTIONS, LLC
14516 SAN PABLO DR. NORTH
JACKSONVILLE, FL.32224

Wednesday, July 21, 1999

FLORIDA DEPT, OF STATE
DEPT. OF CORPORATIONS

TO WHOM IT MAY CONCERN,

I AM THE NEW CFO OF EIGHTEEN PRODUCTIONS, LLC AND HAVE BEEN
MADE AWARE OF YOUR LATE NOTICE CONCERNING THE CORPORATE FEE.
THE ATTORNEY FOR OUR COMPANY ADVISED ME TO SEND THIS LETTER
TO ADVISE YOU THAT **OUR CORP. FEES WERE PREVIOUSLY PAID BY A
MONEY ORDER CK .**

PLEASE CHECK YOUR RECORDS FOR IT MAYBE POSSILBE THIS NOTICE
WAS IN ERROR OR THE FUNDS WERE MISS CREDITED.

I AM, HOWEVER, SENDING A PERSONAL CK. FOR THE ANNUAL REPORT AS
WELL AS THE ADDITIONAL LATE FEE FUNDS TO INSURE OUR
CORPORATE STATUS IS NOT HELD IN JEPARDY.

PLEASE INFORM ME OF YOUR FINDINGS.

SINCERELY,

JEANNE M. STRICKLAND
CC. CAROLYN HERMAN, PA

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SECRETARY OF STATE
TALLAHASSEE FLORIDA