File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS CE APR 25 PH 5: 00 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 **DOCUMENT # L98000000803** 1a. Principal Place of Business Address G AND L REAL ESTATE HOLDINGS, L.L.C. 535 CENTRAL AVENUE, SUITE 300 ST. PETERSBURG FL 33701 535 CENTRAL AVENUE, SUITE 30 ST. PETERSBURG FL 33701 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 06/16/1998 FLSuite. Ant. #. etc. Suite Apt #, etc. 4. FEI Number Applied For 59-3556901 City & State City & State Not Applicable 6. Certificate of Status Desired Country Zip Country Zip \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office LEAHY, TIMOTHY B 535 CENTRAL AVENUE, SUITE 300 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33701 Suite, Apt #, etc 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. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE_ DATE. (Registered Agent Accepting Applicating of the Utilian Registere Lagent signature from the oversetting) Managing Members/Managers **Business Street Address** City, State and Zip Code 10. Title 4566 12TH AVENUE NORTH MGR LA TORRE, JOSEPH ST. PETERSBURG FL 13350 - 86th AUE. SEMINOLE FL 3376 8d0002864398----05/06/99~-01003--804 ****188,79 ****188.79 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 tegal effect as if made under oath; that I am a managing member or manager of the fimited 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

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