
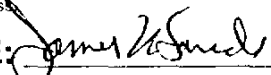


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR 22 PM 2:13

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE					
1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000001133 AMELIA NATIONAL, LLC 5456 FIRST COAST HIGHWAY AMELIA ISLAND FL 32034				1a. Principal Place of Business Address 5456 FIRST COAST HIGHWAY AMELIA ISLAND FL 32034	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip		3. Date Organized or Qualified 07/20/1998 4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report	
3a. State of Formation FL		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>			
7. Name and Address of Current Registered Agent SANDS, JIM 5456 FIRST COAST HIGHWAY AMELIA ISLAND FL 32034			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 000002852880 Suite, Apt. #, etc. -04/27/99--01038--016 City FL Zip Code ***188.75 ***188.75		
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 _____ <small>(Registered Agent Accepting Appointment) (If Not Registered Agent, sign only to resign. Not for use of Group)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	SUMMER BEACH DEVELOPME	5456 FIRST COAST HIGHWAY		AMELIA ISLAND 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:  JAMES H. SANDS (904) 261-0624					