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 erana di Lindra **Katherine Harris** ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** ergenno ett Sital FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE DOCUMENT # L98000001205 Name and Mailing Address
of Limited Liability Company 1a. Principal Place of Business Address WATERFRONT DEVELOPMENTS OF SARASOTA, L.C. 560-YARDARM-LANE 560 YARDARM LANE SARASOTA FL 34228 SARASOTA FL 34228 3. Date Organized or Qualified | 3a. State of Formation 2 Principal Place of Business 2a. Mailing Address 584 HORNALOWER LA 07/24/1998 FLSuite, Apt. #, etc. 4. FEI Number Applied For 65-0855947 City & State LONG BOHT, KEY, FR 6. Certificate of Status Desired \$8.75 Additional Fee Required 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent ROKNICH, NICK III C/O ROKNICH & GIBSON Street Address (P.O. Box Number is Not Acceptable) 1800 SECOND STREET, SUITE 901 SARASOTA FL 34236 Suite, Apt #, etc Zip Code City 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. DATE _. SIGNATURE ... (Registered Agent Adventing Appointment): (NOT): Registered Agent Eignatine to plated where to other to **Business Street Address** City, State and Zip Code Managing Members/Managers 10. Title 34228 560_YARDARM-LANE SARASOTA FL MGR LEHMER, DONALD 584 HOANGLOWER KO, LONG BONT KEY 560 YARDARM LANE SARASOTA FL MGR LEHMER, SUSAN 34228 584 HORNBLOWERKIN houspourkky 100002792651---03/02/39--01083--004 ****188.75 ****188.75 1 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. I further certify that the information braicated 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. ODNAW KAMES 2-20-95

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SIGNATURE: