2 <sup>nd</sup> and File on or before Sept. 29, 1999 or Limited Liability Company											
FÍNAL NOTICE: will be dissolved.  LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS							FILED				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee							99 AUG -6 AH 8: 41				
\$ 588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE							Shahisi Zin ku ku ku				
of Limited Liability Company  DOCUMENT # 198000001252							Shorted Arthur Andrea TALLAHASSEE, FLONDA 1a. Principal Place of Business Address				
W-D PROPERTIES, L.C. C/O SONYA K. DAWS 3838 KILLEARN COURT TALLAHASSEE FL 32308							C/O SONYA K. DAWS 3838 KILLEARN COURT TALLAHASSEE FL 32308				
2 Principal Place of Business			2a. Mailing Address				3. Date Organize	d or Qualified	3a. State	of Formation	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07/28/1998 FI.			المالية	
City & State			City & State				Applied For Not Applicable				
Zip (Country			Zip Country			Ту	5. Date of Last Report			ate of Status Desired	
							<u> </u>		SR 75 Additional Fee Hequired		
7. Name and Address of Current Registered Agent 8. f							Name and Address of New Registered Agent/Office				
DAWS, SONYA K 3838 KILLEARN COURT TALLAHASSEE FL 32308							P.O. Box Number is Not Acceptable)				
HADRINGGE FI 32300					Suite, Apt. #, etc.			-08/10/9901056015			
City							****150.00 ****150.00				
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 Appointment) (the Title Managing Members/Managers				vOTE Registered Agent signature required when reinstating Business Street Address			City, State and Zip Code			Zip Code	
								<del></del>			
MGR	GR WIMBERLEY, ARTHUR P JR 4359				AI LL	INALI DOOW	E	TALLAHASSEE FL			
MGR				338 THORNBERG DRIVE				-damagedana d			
	Lagren aug. 20, 1999-0105 *****38.75 ** 100 20 Suney Farms Lane Talla ha Ssel Ft 32308								*****38.75		
	100 20 Su							ims	la	Ne	
	Tallaha						SSER TI	323	308	/ M/	
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11. I do hereby certify that the information supplied with this filling 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 firmited 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:  SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER.											

July 13, 1999

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, Fl. 32314

To whom it may concern:

Please find enclosed our check in the amount of \$150.00. I was told via phone by Kathy on this date to enclose a letter stating that I never received the first notice, and to remit my check in the amount of \$150.00, along with this letter of statement.

Thank you,

Sonya K. Daws, Manager

W-D Properties, L.C.