



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

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 93 APR 30 AM 10:18	
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 # L98000001706 TIMBERCREEK PROPERTIES, L.L.C. 9200 S. DADELAND BLVD., SUITE 500 MIAMI FL 33156		1a. Principal Place of Business Address 9200 S. DADELAND BLVD., SUITE 500 MIAMI FL 33156			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 09/04/1998 4. FEI Number 65-0868594 5. Date of Last Report	
3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent KEY CORPORATE SERVICES, INC. 200 S. BISCAYNE BLVD., 20TH FLOOR MIAMI FL 33131			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 300002866933--8 Suite, Apt. #, etc. -05/07/99 -01066--003 ****188.75 ****188.75 City FL 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 _____ <small>(If Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when filing for change)</small>					
10. Title MGRM	Managing Members/Managers EQUITYLINE FINANCIAL G	Business Street Address 9200 S. DADELAND BLVD., SU		City, State and Zip Code MIAMI 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:  2/26/99 3056209700					