


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 MAY -3 PM 5:00 CLERK OF THE COURT ORLANDO, FL																					
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 # L98000001749 KNUCKLEHEADS - HUNTER'S CREEK, L.C. 3956 TOWN CENTER BLVD., SUITE 119 ORLANDO FL 32837		1a. Principal Place of Business Address 9430 TURKEY LAKE ROAD, SUITE ORLANDO FL 32819 4101 TOWN CENTER BLVD ORLANDO, FL 32837																							
2. Principal Place of Business 4104 TOWN CENTER Suite PLACE City & State ORLANDO, FL Zip 32837 Country ORANGE		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 09/04/1998 3a. State of Formation FL 4. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 5. Date of Last Report 6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																					
7. Name and Address of Current Registered Agent WORLEY, DEWEY R 4526 SHANEWOOD COURT ORLANDO FL 32837			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code 700002870047 -05/10/99--01134--023 ****188.75 ****188.75 FL																						
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 <u>N/A</u> DATE <u>N/A</u>																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">10. Title</th> <th style="width: 30%;">Managing Members/Managers</th> <th style="width: 30%;">Business Street Address</th> <th style="width: 30%;">City, State and Zip Code</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>WORLEY, DEWEY R</td> <td>4526 SHANEWOOD COURT</td> <td>ORLANDO FL</td> </tr> <tr> <td>MGRM</td> <td>DEBBIE, WILLIAM A</td> <td>8756 LAKE TIBET COURT</td> <td>ORLANDO FL</td> </tr> <tr> <td>MGRM</td> <td>JAMES CARROLL</td> <td>27197 PRADO DEL SOL</td> <td>CARMEL, CA 93923</td> </tr> <tr> <td>MGRM</td> <td>JAMES M. SHEPPARD</td> <td>P.O. BOX 746</td> <td>CARMEL, CA 93921</td> </tr> </tbody> </table>						10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGRM	WORLEY, DEWEY R	4526 SHANEWOOD COURT	ORLANDO FL	MGRM	DEBBIE, WILLIAM A	8756 LAKE TIBET COURT	ORLANDO FL	MGRM	JAMES CARROLL	27197 PRADO DEL SOL	CARMEL, CA 93923	MGRM	JAMES M. SHEPPARD	P.O. BOX 746	CARMEL, CA 93921
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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: <u>DEWEY R. WORLEY</u> <u>DEWEY R. WORLEY</u> <u>4-28-99</u>																									