

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

1. Name and Mailing Address of Limited Liability Company **DOCUMENT #** L980000002131

<b>2 Principal Place of Business</b>		<b>2a. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited partnership hereby agrees to change its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of the partners of the limited partnership, and the undersigned, as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_

[If the undersigned is not a registered agent, please print the name of the registered agent in the space below.]

11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 11.03 of the Securities Exchange Act of 1934, and that my signature shall have the same legal effect as if I were an officer or director of the issuer of the securities of this issuer, or a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 11 of the Securities Exchange Act of 1934, and I am attaching with an address.

**SIGNATURE:** *Raymond E. Smith* *Raymond E. Smith*

1a. Principal Place of Business Address	
101 EAST KENNEDY BOULEVARD, TAMPA FL 33602	
3. Date Organized or Qualified	3a. State of Formation
10/06/1998	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
59-3538239	
5. Date of Last Report	6. Certificate of Status Desired
	\$8.75 Additional Fee Required <input type="checkbox"/>

liability company submits this statement for the purpose of changing  
ative vote of a majority of the members. I hereby accept the appointment

DATE \_\_\_\_\_

	City, State and Zip Code
BOULEVARD	TAMPA FL
	200002871668-- -05/11/98--01070--011 ****188.75 ****188.75

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:** Raymond E. Mills 4-30-99 813/274-8000