File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE **Katherine Harris** ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 00 MM -8 PM 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** L98000002176 1a. Principal Place of Business Address OAKRIDGE PRODUCTS HOLDINGS L.L.C. P.O. BOX 512152 2440-A TAMIAMI TRAIL PUNTA GORDA FL 33951-2151 PORT CHARLOTTE FL 33952 2 Principal Place of Business 3. Date Organized or Qualified | 3a. State of Formation 2a. Mailing Address 10/08/1998 FL Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 65-0868476 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zφ I Country Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BUCHAS, FREDERICK P Street Address (P.O. Box Number is Not Acceptable) 2440-A TAMIAMI TRAIL FORT CHARLOTTE FL 33952 Suite, Apt. #, etc. 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE _ ... (Beginner 4 Agent A. egeng Apper acces). (North Hightenst Apper signature in per twins on in Strag 10. Title Managing Members/Managers **Business Street Address** City. State and Zin Code MGRM BUCHAS, FREDERICK P P.O. BOX 512152 PUNTA GORDA FL MGRM BUCHAS, JUDITH F P.O. BOX 512152 PUNTA GORDA FL T.J.C. APR 1 1 1999 ****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. Hurther 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 receiper 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

L FARDERICK P. BUCHAS 330-99 941-255-9888

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attachment with an address.

SIGNATURE: