
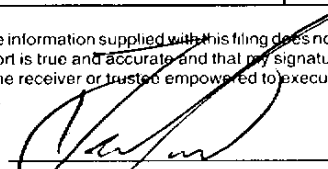


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAR -1 PM 3: 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 # L98000002188		1a. Principal Place of Business Address	
HORSESHOE PARK OF COMMERCE, L.C. 1361 AIRPORT ROAD NORTH NAPLES FL 34104				1361 AIRPORT ROAD NORTH NAPLES FL 34104	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10/07/1998	
City & State		City & State		4. Fee Number	
Zip		Country		5. Date of Last Report	
				6. Certificate of Status Desired	
				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
ARNOLD, DEAN A 1361 AIRPORT ROAD NORTH NAPLES FL 34104		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when not listed on report)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	ARNOLD, DEAN A	1361 AIRPORT ROAD NORTH		NAPLES FL	
				700002798187--C -03/08/99--01129--023 ****188.75 ****188.75 3-3-99	
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:  2/25/99 941-643-6333					