File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FII FD ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 29 PH 1: 22 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE TALL AHASSEE, FLORIDA **DOCUMENT #** L98000002248 Name and Mailing Address of Limited Liability Company 1a. Principal Place of Business Address ADSIL LC P.O. BOX 353880-3880 1504 OLD MOODY BLVD., #302 BUNNELL FL 32110 PALM COAST FL 32135 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address Principal Place of Business 1 HARGROVE GRADE 10/12/1998 Suite, Apt. #, etc. Applied For *59-35403*09 City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 32137 B. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent HNTHONY A. GEDEON S. DAVID & CO., INC. Street Address (P.O. Box Number is Not Acceptable) 4856 VICTOR-ST HARGROUE GRADE SUITE JACKSONVILLE FL 32207 SUITE Zip Code 32137 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 \_ d Agost sensature required whose femalables City, State and Zip Code **Business Street Address** Managing Members/Managors 10. Title STANICH, JEFFREY L SR 6327 73RD STREET, #108 KENOSHA WI MGR PALM COAST FL GEDEON, ANTHONY A 3 LAGUNA COURT MGR MICHAEL K. HAIR 7407 EAST IRONWOUDCT. SCOTTS PALE AZ MGK 05258 800002870388--05/11/99--01006--017 \*\*\*\*197.50 \*\*\*\*197.50

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3) (i). Florida Statutos. 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 it made under eath; 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: \_

NUSE10 R (12-98)