


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 <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 MAR -9 AM 10:24	
<b>FILING FEE \$ 188.75</b>		<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>					
1. Name and Mailing Address of Limited Liability Company <b>DOCUMENT # L98000002266</b>  GRAND LAKE RV RESORT, L.L.C. C/O ROBERT S. FORMAN, ESQ. 2101 WEST COMMERCIAL BOULEVARD, STE 4100 FORT LAUDERDALE FL 33309				1a. Principal Place of Business Address  C/O ROBERT S. FORMAN, ESQ. 2101 WEST COMMERCIAL BOULEVARD FORT LAUDERDALE FL 33309			
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip		2a. Mailing Address  Suite, Apt. #, etc.  City & State  Zip		3. Date Organized or Qualified  10/15/1998		3a. State of Formation  FL	
				4. FEI Number  65-0871555		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report		6. Certificate of Status Desired <b>\$8.75 Additional Fee Required</b> <input type="checkbox"/>	
7. Name and Address of Current Registered Agent  FORMAN, ROBERT S ESQ. C/O ROBERT S. FORMAN, ESQ. 2101 WEST COMMERCIAL BOULEVARD, STE FORT LAUDERDALE FL 33309				8. Name and Address of New Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc. 600002801046 03/10/99 - 01060 - 014 City ****188.75 FL Zip Code ****188.75			
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 _____			
(Registered Agent Accepting Appointment) (SOLE Registered Agent signature required when not a director)							
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code			
MGRM	SCHAUB, RICHARD G JR.	2922 CARDINAL DRIVE		VERO BEACH FL			
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:		MGRM RICHARD G. SCHAUB, JR. 2-25-99 561-234-3540					