

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
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FILED

99 MAR -8 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company	DOCUMENT #	L98000002364
AFFINITY MANAGEMENT CONSULTING GROUP, L.L.C. P.O. BOX 290092 PORT ORANGE FL 32129		

1a. Principal Place of Business Address	737 HUNT CLUB TRAIL PORT ORANGE FL 32127
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2 Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	10/22/1998	FL
City & State	City & State	4. FEI Number	<input type="checkbox"/> Applied For
Zip	Country	59-3546172	<input type="checkbox"/> Not Applicable
		5. Date of Last Report	6. Certificate of Status Desired
			\$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent
EVANS, CLIFFORD 737 HUNT CLUB TRAIL PORT ORANGE FL 32127

8. Name and Address of New Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code
FL

I, 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 _____

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	EVANS, CLIFFORD	737 HUNT CLUB TRAIL	PORT ORANGE FL
MGR	IRVINE, JOHN	737 HUNT CLUB TRAIL	PORT ORANGE FL
MGR	MARCINKO, JOHN	737 HUNT CLUB TRAIL	PORT ORANGE FL

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 ***188.75 ***188.75
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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: Clifford Evans Feb 26/99 904-788-2244