
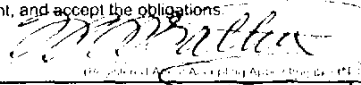
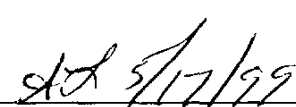
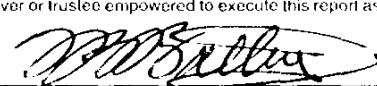


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAY 13 PM 12: 21 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 # L98000002460 SANFORD 46, II, L.L.C. 237 ERNESTINE STREET ORLANDO FL 32801		1a. Principal Place of Business Address 237 ERNESTINE STREET ORLANDO FL 32801			
2. Principal Place of Business 213 Shady Oak Circle Suite, Apt #, etc		2a. Mailing Address 213 Shady Oak Circle Suite, Apt #, etc		3. Date Organized or Qualified 10/27/1998	
City & State Lake Mary, FL		City & State Lake Mary, FL		3a. State of Formation FL <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip 32746		Country USA		4. FEI Number 59-3544845	
7. Name and Address of Current Registered Agent MOORE, DONALD L JR. 237 ERNESTINE STREET ORLANDO FL 32801		8. Name and Address of New Registered Agent/Office Name Thomas B. Ball, III Street Address (P.O. Box Number is Not Acceptable) 213 Shady Oak Circle Suite, Apt #, etc City Lake Mary, FL Zip Code 32746			
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 03 26 99			
10. Title Managing Members/Managers Business Street Address City, State and Zip Code					
MGRM BALL, T.B. III		213 SHADY OAK CIRCLE		LAKE MARY FL	
800002882438--B -05/21/99--01072--012 ****188.75 ****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. 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: 		03 26 99 407/324 0144			