


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

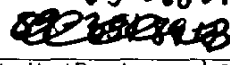
LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN 17 AM 10:05

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 # L98000002588
KRAFT CUSTOM HOMES, L.L.C. 2606 SOUTH HORSESHOE DRIVE NAPLES FL 34104	


1a. Principal Place of Business Address
2606 SOUTH HORSESHOE DRIVE NAPLES FL 34104

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	11/05/1998	FL
City & State	City & State	4. FEI Number 65-0880123	<input type="checkbox"/> Applied For
Zip	Country		<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	8. Name and Address of New Registered Agent/Office
GRANT, RICHARD C GRANT, FRIDKIN, PEARSON, ATHAN 5551 RIDGEWOOD DRIVE, SUITE 501 NAPLES FL 34108	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 800002915018-4 City -06/24/99--01109--008 ****188.75 ****188.75 FL

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 1/3418 4/29/99 DATE 4/29/99
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	KRAFT CONSTRUCTION COM	2606 SOUTH HORSESHOE DRIVE	NAPLES FL
	10-20-10 9050	<div style="border: 1px solid black; padding: 5px;"><p>VENDOR # _____ JOB # _____ C-CODE _____ G.L. DR. _____ G.L. CR. _____ APPROVAL _____</p></div>	Home Division Overhead RTH 4/23/99 

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: Robert H. Stanley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER