


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		99 MAY 10 AM 9:58 <i>with</i> 5/12	
<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 #</b> L98000002716		1a. Principal Place of Business Address	
FLORIDA SUN GARDENS, L.C. 4646 WEST IRO BRONSON MEMORIAL HIGHWAY KISSIMMEE FL 34746				4646 WEST IRO BRONSON MEMORI KISSIMMEE FL 34746	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		11/09/1998	
City & State		City & State		FL	
Zip		Country		4. FEI Number	
				000002874019-0	
				-05/13/99--01078--005	
				***188.75 ***188.75	
				5. Date of Last Report	
				6. Certificate of Status Desired	
				S8 75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
SLAMAN, ROBERT A 4646 WEST IRLO BRONSON MEMORIAL HIGH KISSIMMEE FL 34746				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				Suite, Apt. #, etc.	
				City	
				Zip Code	
				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 _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature required when re-appointing)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	NADASDY, BEN	AVENUE DE L'ESPINETTE CENT		1640 RHODE-SAINT-GEN	
MGR	HOLTH, SVEND	AVENUE DES POULES D'EAU 11		-GENESE, BELGIUM	
MGR	BANDERSLEYEU, MICHEL	RUE DE SUARLEE, 20, LA BRU		BELGIUM	
MGR	BROWN, WILLIAM D	823 MCCALLS MILL ROAD		LEXINGTON KY	
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: <i>Will OR</i> 5/1/99 606-263-3366					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					