

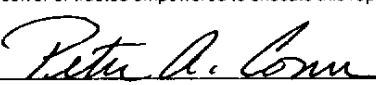


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
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 L. PACSON COMPANY, LLC 6010 LAUDERDALE STREET PALM BEACH GARDENS FL 33418 ANNEXED WITH JUPITER NEW ZIP STARTING MAY 1, 1999 33458		DOCUMENT # L98000002882			
2. Principal Place of Business 6010 LAUDERDALE STREET Suite, Apt. #, etc.		2a. Mailing Address P.O. Box 250 Suite, Apt. #, etc.		1a. Principal Place of Business Address 6010 LAUDERDALE STREET PALM BEACH GARDENS FL 33418 JUPITER FL 33458	
City & State JUPITER FLORIDA		City & State JUPITER FLORIDA		3. Date Organized or Qualified 11/23/1998	
Zip 33458		Country USA		4. FEI Number 06-1533170	
Zip 33468-0250		Country		3a. State of Formation FL	
7. Name and Address of Current Registered Agent CONN, PETER A 6010 LAUDERDALE STREET PALM BEACH GARDENS FL 33418 JUPITER, FL 33458		5. Date of Last Report 06-1533170			
8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code		6. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
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 _____ (Registered Agent Accepting Appointment)		_____ (Registered Agent signature required when reappointing)		DATE _____	
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	CONN, PETER A	6010 LAUDERDALE STREET		PALM BEACH GARDENS FL JUPITER FL 33458 300002888705 05/07/99--01161--017 ****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. 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: 		4/26/99 561-691-4331			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					