File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAR 10 PH 3: 13 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** 198000003021 1a. Principal Place of Business Address HOUGHTON CAPITAL PARTNERS, LLC 100 SECOND AVENUE SOUTH, SUITE 600 100 SECOND AVENUE SOUTH, ST. PETERSBURG FL 33701 ST. PETERSBURG FL 33701 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 11/30/1998 4. FEI Number Applied For City & State Not Applicable 6. Certificate of Status Desired Country 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent HOUGHTON, BETH A 100 SECOND AVENUE SOUTH, SUITE 6005 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33701 Suite, Apt. #, etc. Zip Code 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. SIGNATURE Business Street Address 10. Title Managing Members/Managers HOUGHTON, BETH A MGR 100 SECOND AVENUE SOUTH, S ST. PETERSBURG FL 00002804872----03/15/99--01006--009 \*\*\*\*188.75 \*\*\*\*188.7 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (1), 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 SIGNATURE:

akton

manager

JNHSE10 R (12-98)