File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILED SECRETARY OF STATE DIVISION OF CORFORATIONS Katherine Harris ANNUAL REPORT Secretary of State ...
DIVISION OF CORPORATIONS 1999 99 APR - 7 PM 2: 22 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 198000003088** 1a. Principal Place of Business Address FIRESTOP ASSOCIATES L.C. 725 WYNNEHURST ST. 725 WYNNEHURST ST. PENSACOLA FL 32503 PENSACOLA FL 32503 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 12/09/1998 FLSurto, Apl. #, etc Suite, Apt. #, etc 4. FEI Number Applied For City & State City & State 59-3538919 Not Applicable 5. Date of Last Heport Certificate of Status Desired Country Country St 75 And tion | Fee Regimed 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Namo Donald P. Benford Street Address (P.O. Box Number is Not Acceptable) 725 Wynnehurst St. Suite Ant #, etc 900002834049--04/03/33-01002-004 FL 32803-2437***188. City Pensacola 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. Thereby accept the appointment as registered agent, and accept the obligations DATE 03/22/99 0 SIGNATURE 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code MGRM BENFORD, PHILIP H 410E North 48th St. Pensacola FL MGRM BENFORD, DONALD P 725 WYNNEHURST ST. PENSACOLA FL 11. I do hareby certify that the information supplied with this hing does not qualify for the exemption stated in Section 119 07(3) (i), Florida Statutes. Hurther cortify 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 Statules, and that my name appears in Block 10, or on an attachment with an address. attachment with an address. 03/23/99 Donald P. Benford SIGNATURE: