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 Katherine Harris ANNUAL REPORT Secretary of State 1999 99 IMR 26 AM 10: 00 DIVISION OF CORPORATIONS 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** # 198000003196 1a. Principal Place of Business Address VII NOBLES PROPERTIES, L.L.C. 6 LIONSPAW VII NOBLES 6 LIONSPAW VII NOBLES DAYTONA BEACH FL 32124 DAYTONA BEACH FL 32124 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 2. Principal Place of Business 12/15/1998 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 59-3546698 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Ζip Country S8 75 Additional Fee Required B. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32115 Suite, Apt. #, etc. City 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, and accept the obligations. DATE SIGNATURE (Registered Agent Accepting Appoint her t) (IVCI): Registered Agent signature required when torosticing City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** DAYTONA BEACH FL MGRM HENDERSON, EARLE H 6 LIONSPAW VII NOBLES 32124 \*\*\*\*188.75 \*\*\*\*188.7\$

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as it 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:

NHSE 10 R (12-98)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANACING MEMBER OR MANACINE.

Taile & Henderson EARLE H. HENDERSON 3/24/99 (904)274-4071