


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 MAY -4 PM 1:30					
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		DOCUMENT # M94000000004		1a. Principal Place of Business Address	
SOUTH FLORIDA PROPERTIES OF S.W. FLORIDA, L.C. 1705 NATIONAL BOULEVARD MIDWEST CITY OK 73110				1705 NATIONAL BOULEVARD MIDWEST CITY OK 73110	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/10/1994	
City & State		City & State		3a. State of Formation	
Zip		Country		OK	
				4. FEI Number	
				73-1435928	
				5. Date of Last Report	
				02/10/1997	
				6. Certificate of Status Desired	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				8. Certificate of Status Desired	
				SB 75 Additional Fee Reported <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
MOOREY, THOMAS E 1430 ROYAL PALM SQUARE BLVD., SUITE FORT MYERS FL 33919				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 _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	T-REX INVESTMENTS LI,	1705 NATIONAL BOULEVARD		MIDWEST CITY OK	
MGRM	D'ALESSANDRO, FRANK	8801 COLLEGE PARKWAY, SUITE		FORT MYERS FL	
MGRM	FOSTER, GLENN A JR.	613 245H AVE., S.W.		NORMAN OK	
500002515955--4 -05/07/98--01103--024 ****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: Glenn A. Foster, Jr. 4/28/98
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #