


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

FILED

97 MAR 31 AM 7:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
--------------------------------	---

1. Name and Mailing Address of Limited Liability Company	DOCUMENT # M95000000221
GENUINE LOG HOMES, LLC, L.C. 6017 PINE RIDGE ROAD, SUITE 223 NAPLES FL 33999	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.	

1a. Principal Place of Business Address
6017 PINE RIDGE ROAD, SUITE 2 NAPLES FL 33999

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	07/20/1995	NV
City & State	City & State SAME	4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	88-0335232	5. Date of Last Report
			04/19/1996
		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/>	

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
CORPORATION SERVICE, COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name JERRY GOLDBERG Street Address (P.O. Box Number is Not Acceptable) 6030 10TH AVE. N.W. Suite, Apt. #, etc. City NAPLES, FL Zip Code 34119

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 *Jerry Goldberg* DATE 3/24/97
(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	GOLDBERG, JERRY	3823 TAMiami TRAIL EAST, S	NAPLES FL
MGRM	SIRIMARCO, JOE	1125 W. BASELINE ROAD, SUI	MESA AZ
			200002131462--8 -04/02/97--01080--011 ****203.75 ****203.75 DB3-31-97

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: *Jerry Goldberg* 3/24/97 941-594-9552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #