
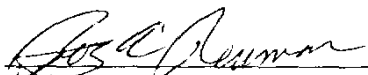


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
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 # M95000000351 GTW SPACE SYSTEMS L.L.C. P.O. BOX 8098 GRAND RAPIDS MI 49518-8098		1a. Principal Place of Business Address 7301 124TH AVE. NORTH LARGO FL 33773	
2. Principal Place of Business 12555 Enterprise Blvd. Suite, Apt. #, etc. Suite 101 City & State Largo, FL Zip 33773	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country U.S.A.	3. Date Organized or Qualified 11/28/1995	3a. State of Formation MI
7. Name and Address of Current Registered Agent NEWMAN, ROY 7301 124TH AVE. NORTH LARGO FL 33773		8. Name and Address of New Registered Agent/Office Name Roy Newman Street Address (P.O. Box Number is Not Acceptable) 12555 Enterprise Blvd. Suite, Apt. #, etc. Suite 101 City Largo Zip Code FL 33773	
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 reappointing)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	NEWMAN, ROY	7301 124TH AVENUE NORTH	LARGO FL
800002806398--2 -03/15/99--01131--024 ****188.75 ****188.75 AL MAR 11 1999			
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:  ROY A. NEWMAN 2-24-99 727-532-1611			