


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 98 MAY -1 PM 4:09 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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 STUMAN & WADE HOLDING COMPANY, LLC 285 PALISADES BLVD HOMEWOOD AL 35209		DOCUMENT # M96000000034			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		1a. Principal Place of Business Address 285 PALISADES BLVD HOMEWOOD AL 35209	
3. Date Organized or Qualified 01/25/1996		3a. State of Formation AL		4. FEI Number 63-1147704 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report 04/14/1997		6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent COVIN, AUBREY C 17119 PERDIDO DRIVE A32 PENSACOLA FL 32507		8. Name and Address of New Registered Agent/Office Name Haron Lovett Street Address (P.O. Box Number is Not Acceptable) 3136 Hwy 77 Suite, Apt. #, etc. City Panama City Zip Code FL 32405			
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 [Signature] DATE 4/28/98 (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	WADE, WILLIAM H JR	285 PALISADES BLVD		HOMEWOOD AL 800002514808--3 -05/07/98--01015--004 ****188.75 ****188.75 [Signature]	
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: William H. Wade, Jr. DATE 4/28/98 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #					