

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

**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 JUN -2 PM 3: 25

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

1. Name and Mailing Address of Limited Liability Company **DOCUMENT #** M96000000099

Regency Equities, L.C.
444 Brickell Avenue, Suite 51-246
Miami, Florida 33131

1a. Principal Place of Business Address
Ocala North Shopping Center
US 441 & NW 35th Street
Ocala, Florida

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3/26/96	AZ
City & State		City & State		4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country		86-0753492	
				5. Date of Last Report	6. Certificate of Status Desired
				4/28/97	<input checked="" type="checkbox"/> STATE ADDITIONAL FEE REQUIRED

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
IBC Fiduciary Inc.		Name	
100 SE 2nd Street, Suite 2315-A		Street Address (P.O. Box Number is Not Acceptable)	
Miami, Florida 33131		Suite, Apt. #, etc.	
		City	
		FL	
		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.

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
MGR	Smejda, Lucius	444 Brickell Av., S. 51-246	Miami, Florida 33131
MGRM	Dully, Thomas	444 Brickell Av., S. 51-246	Miami, Florida 33131
MGR	Queenferry, L.C.	444 Brickell Av., S. 51-246	Miami, Florida 33131
MGR	Regency Trust	444 Brickell Av., S. 51-246	Miami, Florida 33131

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****188.75 ****188.75

[Signature]
6-2

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: Lucius Smejda 5/1/98 305-358-4441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #