


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

APPROVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
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 WESTMINSTER FIDELCO, L.L.C. P.O. BOX 6872 BRIDGEWATER NJ 08807		DOCUMENT # 196000000146	
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 981 ROUTE 22 BRIDGEWATER NJ 08807	
2. Principal Place of Business Suite, Apt. #, etc. <i>Same</i>	2a. Mailing Address 981 Route 22 Box 6872	3. Date Organized or Qualified 04/26/1996	3a. State of Formation NJ
City & State	City & State BRIDGEWATER, NJ	4. FEI Number 22-3420501	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country 08807 USA	5. Date of Last Report	6. Certificate of Status Desired <input type="checkbox"/> Additional Fee Required
7. Name and Address of Current Registered Agent SHEAR, DAVID & FRIEDSTONE, GUSTER & SHEAR 600 SOUTH BISCAYNE BLVD., SUITE 2100 MIAMI BEACH, FL 33131		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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
MGRM	KUSHNER, MURRAY	981 ROUTE 22	BRIDGEWATER NJ 600002090926--7 -02/18/97--01109--001 ****203.75 ****203.75 <i>A. Alaw</i> <i>2/14/97</i>

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #