


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		16 99 APR -5 AM 10:28 FILED STATE 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 # M96000000309 BAYSHORE TOWERS, LLC 1430 WYNNTON ROAD COLUMBUS GA 31901		<i>GA-AR</i> <i>cm</i>		1a. Principal Place of Business Address 1430 WYNNTON ROAD COLUMBUS GA 31901	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 08/14/1996 3a. State of Formation GA 4. FET Number 58-2267644 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable NOT APPLICABLE 5. Date of Last Report 04/03/1998 6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent TARKOW, STANLEY A 511 BAY STREET, SUITE 410 TAMPA FL 33606			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code <div style="text-align: right;">FL</div>		
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 _____		
<small>(Registered Agent Accepting Appointment) (Not: Registered Agent signature required when accepting appointment)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGR	SCHIFFMAN, ROBERT M	1030 SECOND AVENUE		COLUMBUS GA	
MGRM	WOODWARD, JOHN W TRUST	1030 SECOND AVENUE		COLUMBUS GA	
8000002845438- 3 -04/20/99--01077- 023 ****188.75 ****188.75					
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: <i>John Woodward</i> <i>John Woodward</i> <i>2/17/99</i> <i>(613) 322-2814</i>					