File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY **Katherine Harris** ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAY -3 PH 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT # M96000000449** 1a. Principal Place of Business Address ROBINSON-BYRD, L.L.C. 312 BRYAN DRIVE 312-BRYAN DRIVE OZARK AL 36360-**OZARK AL 36360** 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 17642 Front Beach Rd. 7642 Front Beacle Rd 11/12/1996 AT. 4. FEI Number Applied For 63-1159094 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required 04/27/1998 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office BYRD, DANIEL G 249 16TH STREET Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32413 Front Brach Rd nama Citu Beach Pursuant to the previsions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing registered office or registered agent to both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment registered agent and accept the objigations. s registered agent DATE 5-1-99 SIGNATURE nt) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM BYRD, DANIEL G ·312 BRYAN DRIVE OZARK AL 17642 Front BeachRd Unit D-3 Panama City Beach, FL 32413 ****188.75 ****188.75 11. Ido 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 shell 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 of trustee empowered to execute this legon as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

JNHSE10 R (12-98)

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF LIGHTING MANAGING MEMBER OR MANAGINE TO THE