


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1999</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  <b>99 APR 26 AM 10:22</b>																	
<b>FILING FEE \$ 188.75    Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>																					
<b>1. Name and Mailing Address of Limited Liability Company    DOCUMENT # M97000000338</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>SUNDANCE PROPERTIES, L.L.C.</b>  <b>400 W. MAPLE, SUITE 250</b>  <b>BIRMINGHAM MI 48009</b> </div> <div style="width: 35%;"> <b>1a. Principal Place of Business Address</b>   <b>400 W. MAPLE, SUITE 250</b>  <b>BIRMINGHAM MI 48009</b> </div> </div>																					
<b>2. Principal Place of Business</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>2a. Mailing Address</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>3. Date Organized or Qualified</b> <b>06/11/1997</b>  <b>3a. State of Formation</b> <b>MI</b>  <b>4. FEI Number</b> <b>38-3240595</b>  <b>5. Date of Last Report</b> <b>03/10/1998</b>  <b>6. Certificate of Status Desired</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/> \$8.75 Additional Fee Required																	
<b>7. Name and Address of Current Registered Agent</b>  <b>THURSTON, DALE</b> <b>1004 OVERLOOK DRIVE</b> <b>DELAND FL 32724</b>			<b>8. Name and Address of New Registered Agent/Office</b> Name Street Address (P.O. Box Number is Not Acceptable) <b>4000002858324 - 3</b> Suite, Apt. #, etc.      -04/30/99 - 01078 - 015 City      ***188.75      ***188.75 <div style="text-align: right;"> <b>FL</b>      <i>[Signature]</i> </div>																		
<b>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.</b>  SIGNATURE _____ DATE _____ <small>(If Registered Agent, Print Name and Address)      (If Not, Registered Agent's Signature and Address Where Registered)</small>																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">10. Title</th> <th style="width: 30%;">Managing Members/Managers</th> <th style="width: 30%;">Business Street Address</th> <th style="width: 30%;">City, State and Zip Code</th> </tr> </thead> <tbody> <tr> <td>MGRM</td> <td>BAYER, ROBERT B</td> <td>400 W. MAPLE, #250</td> <td>BIRMINGHAM MI</td> </tr> <tr> <td><del>MGR</del></td> <td><del>PRICE, DENISE</del></td> <td><del>3151 N.W. 44TH AVE., LOT #</del></td> <td><del>OCALA FL</del></td> </tr> <tr> <td>MGR</td> <td>THURSTON, DALE</td> <td>1004 OVERLOOK DRIVE</td> <td>DELAND FL</td> </tr> </tbody> </table>						10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code	MGRM	BAYER, ROBERT B	400 W. MAPLE, #250	BIRMINGHAM MI	<del>MGR</del>	<del>PRICE, DENISE</del>	<del>3151 N.W. 44TH AVE., LOT #</del>	<del>OCALA FL</del>	MGR	THURSTON, DALE	1004 OVERLOOK DRIVE	DELAND FL
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<b>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.</b>  <b>SIGNATURE:</b> <i>Robert B. Bayer</i> <b>4/19/99</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MEMBER OR MANAGING MEMBER</small>																					