


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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<b>FILING FEE</b> \$ 188.75	<b>Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee</b> <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company	<b>DOCUMENT #</b> M97000000370
PEDIANET, LLC <del>310 25TH AVENUE NORTH</del> 703 OLD HICKORY BLVD. <del>NASHVILLE TN 37203</del> STE 263-B BRENTWOOD, TN 37027	

1a. Principal Place of Business Address	
<del>310 25TH AVENUE NORTH</del> <del>NASHVILLE TN 37203</del>	
3. Date Organized or Qualified	3a. State of Formation
06/20/1997	TN
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
62-1649090	
5. Date of Last Report	6. Certificate of Status Desired
	<input type="checkbox"/> SB 75 Additional Fee Required

2. Principal Place of Business	2a. Mailing Address
703 OLD HICKORY BLVD Suite, Apt. #, etc. STE 263-B City & State BRENTWOOD TN Zip 37027 Country USA	703 OLD HICKORY BLVD Suite, Apt. #, etc. STE 263-B City & State BRENTWOOD TN Zip 37027 Country USA

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
NRAI SERVICES, INC. 526 E. PARK AVENUE TALLAHASSEE FL 32301	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	NETTERVILLE, JOHN T M.	<del>310 25TH AVENUE NORTH</del>	<del>NASHVILLE TN</del>
MGRM	CLARKE, DEBORAH M	703 OLD HICKORY BLVD - STE 263-B	BRENTWOOD, TN 37027
MGRM	RICHARD GREGORY B.	<del>310 25TH AVENUE NORTH</del>	<del>NASHVILLE TN</del>
MGR	CRUSBL, JOHN B.	703 OLD HICKORY BLVD - STE 263-B	BRENTWOOD, TN 37027
MGR	STEDMAN, STEVEN D.	SAME	
		SAME	
		SAME	

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\*\*\*\*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: Steven D. Stedman 3/4/98 665/376-4470  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #