File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE **Katherine Harris** ANNUAL REPORT FILED Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 APR 27 M 9:30 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # M97000000396** 1a. Principal Place of Business Address TBG DEVELOPMENT, LLC 226 S. MERAMEC, SUITE 200 226 S. MERAMEC, SUITE 200 ST. LOUIS MO 63105 ST. LOUIS MO 63105 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 07/01/1997 MO Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & Stale City & State 43-1757931 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country S8 75 Additional Fee Required 05/05/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office DUPUIS, MIKE 400 CELEBRATION PLACE Street Address (P.O. Box Number is Not Acceptable) FITNESS CENTER CELEBRATION FL 34747 Suite, Apt. #, etc. City Zip Code 2. 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 his 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, thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE [Registered Agent Accepting Appointment] (NOTE: Registered Agent signature registed when relies they). DATE __ 10. Title Managing Members/Managers Business Street Address City, State and Zip Code BENSKY, JEFFREY M MGRM 226 S. MERAMEC, SUITE 200 ST. LOUIS MO MGR LYNCH, DANIEL J 226 S. MERAMEC, SUITE 200 ST. LOUIS MO 102959799--15/03/99--01014--003 ****188.75 ****188.79 11. I do hereby certify that the information supplied with this filing does not quality 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 required or must be 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.

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER

INHSE10 R (12-98)

SIGNATURE: