

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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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 MAY -1 PM 1:59

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company  
**DOCUMENT # M97000000544**  
  
CSX REALTY DEVELOPMENT, LLC  
500 WATER ST.  
JACKSONVILLE FL 32202

1a. Principal Place of Business Address  
  
500 WATER ST.  
JACKSONVILLE FL 32202

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified		3a. State of Formation	
Suite, Apt. #, etc.		500 Water Street		08/21/1997		GA	
City & State		Suite, Apt. #, etc.		4. FEI Number		<input type="checkbox"/> Applied For	
Zip		S/C J-160		58-1251206		<input type="checkbox"/> Not Applicable	
Country		City & State		5. Date of Last Report		6. Certificate of Status Desired	
32202		Jacksonville, FL		N/A		Sub 25 Additional Fee Required <input type="checkbox"/>	
USA							

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office	
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, etc.	
		City	
		Zip Code	
		FL	

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
MGRY	BECK, S D	301 WEST BAY ST.	JACKSONVILLE FL
MGRY	SANDLER, P D	5656 ADAMO DR.	TAMPA FL
MGRY	WARD, M J	500 WATER ST.	JACKSONVILLE FL
MEMBER	CSX TRANSPORTATION, INC.	500 WATER ST.	JACKSONVILLE, FL 32202

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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. CSX TRANSPORTATION, INC., SOLE MEMBER

SIGNATURE:  March 16, 1998 (904) 366-4242  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #