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 SECULTARY OF STATE OMISION OF CORPORATIONS Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 9911ER - 9 MI 10: 26 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT** # M97000000667 1a. Principal Place of Business Address TREE BROTHERS SERVICES, LLC 3400-C WEST WENDOVER AVENUE 3400-C WEST WENDOVER AVENUE GREENSBORO NC-27407 GREENSBORO NG 27407 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 11061 Indiantown Rd Suite, Apt. #, etc. 11061 Indiantown Kd. 10/07/1997 NC 4. FEI Number Applied For City & State City & State 65-0787105 Not Applicable Jupiler Jupiter, FL 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 33978 03/09/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office C T CORPORATION SYSTEM Richard K. Fowler 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PHANTATION FL 33324 825 South Hary 1 Suite 220 Zip Code Jupiter 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. Thereby accept the appointment as registered agent, and accept the obligations. DATE 2-25-99 SIGNATURE City, State and Zip Code 10. Title Managing Members/Managers **Business Street Address** Jupiny FL 33458 GREENSBORD NC S. VILLAR WAY 3400-C WEST WENDOVER AVENU FOWLER, RICHARD K MGR MGR GIBSON, JAMES 3400 GEORGIA AVE. WEST PALM BEACH FL ndono2800920---03/10/99--01082--016 ****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 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 SIGNATURE:

SIGNATURE AND TYPE DISCREPENTE DINAME OF SEGUED MANAGER, AS MEDIT DREMANAGER.

JNHSE10 R (12-98)

Original Production #