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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
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 APR 29 AM 8:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 # M97000000767
FD CORDOVA CROSSING ASSOCIATES, L.L.C.
1765 MERRIMAN ROAD
AKRON OH 44313

1a. Principal Place of Business Address
1765 MERRIMAN ROAD
AKRON OH 44313

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Organized or Qualified
11/19/1997
3a. State of Formation
OH
4. FEI Number
34-1854234
5. Date of Last Report
6. Certificate of Status Desired
\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
UCC FILING & SEARCH SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE FL 32301

8. Name and Address of New Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
600002511256--0
Suite, Apt. #, etc. -05/05/98--01093--023
****188.75 ****188.75
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.

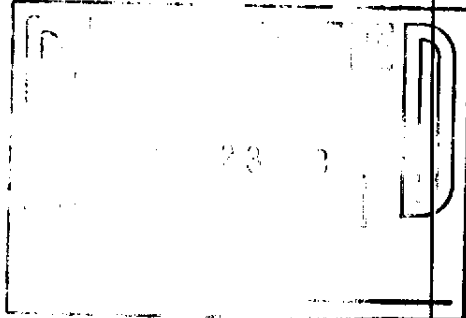
SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	ENTERPRISE CAPITAL D,	1765 MERRIMAN ROAD	AKRON OH

POSTED

APR 27 1998 JEL

BATCH # 1573



AL APR 30 1998

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: *Alan W Spenceller*
ALAN W SPENCER
Enterprise Capital Development Corp.
Date: 4/27/98 Daytime Phone #: 330-836-9971