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 FILED Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 FEB 26 PM 3: 31 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee SECTION OF STATE TALLAHASSEE, FLORIDA \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address
of Limited Liability Company **DOCUMENT # M97000000808** 1a. Principal Place of Business Address FLORIDA WEST REAL ESTATE L.L.C. 1865 OLD RANCH ROAD 1865 OLD RANCH ROAD COLORADO SPRINGS CO 80908 COLORADO SPRINGS CO 80908 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 12/02/1997 Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 94-3266193 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country \$8.75 Additional Fee Required 03/13/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name CORNUKE, PAUL L 3740 GULF OF MEXICO DR., 70 Street Address (P.O. Box Number is Not Acceptable) LONGBOAT KEY FL 34228 Suite, Apt. #, etc City 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): (NOT): Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code CORNUKE, PAUL 1865 OLD RANCH COLORADO SPRINGS CO MGRM RD. CORNUKE, NANCY COLORADO SPRINGS CO MGRM) 1865 OLD RANCH RD. 1dana2795341--3 -naznszaa--01010--021. ****188.75 ****188.75 MAR : 2 1998 AL 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.

INHSE10 R (12-98)

SIGNATURE:

NATURE AND TYPE (FOR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

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