
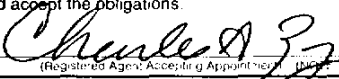



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 MAR 22 AM 8:33 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # M98000000133		1a. Principal Place of Business Address	
BRAY & GILLESPIE, L.L.C. 665 SUNSET BLVD. GAINESVILLE GA 30501				665 SUNSET BLVD. GAINESVILLE GA 30501	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/12/1998	
City & State		City & State		3a. State of Formation	
Zip		Zip		GA	
Country		Country		4. FEI Number	
				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				5. Date of Last Report	
				6. Certificate of Status Desired	
				S8 75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent				8. Name and Address of New Registered Agent/Office	
DANIELS, DOUGLAS A C.O HEEBNER, BAGGETT & DANIELS 523 NORTH HALIFAX AVENUE DAYTONA BEACH FL 32118				Name BRAY & GILLESPIE LLC Street Address (P.O. Box Number is Not Acceptable) P.O. Box 265400 Suite, Apt. #, etc. 19 N ATLANTIC AVE City DAYTONA BEACH FL Zip Code 32126	
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 2/10/99	
(Registered Agent Accepting Appointment)				(Required Registered Agent signature when reappointing)	
10. Title		Managing Members/Managers		Business Street Address	
MGRM		BRAY, CHARLES A		665 SUNSET BLVD.	
				City, State and Zip Code	
				GAINESVILLE GA	
				900002823979--7 -03/30/99--01077--025 ****188.75 ****188.75	
				42 3-26-99	
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:  2/10/99					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					