


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

FILED

99 APR 12 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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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 # M98000000237
INDEPENDENT DEVELOPMENT COMPANY, LLC 705 EAST OAK STREET, SUITE E KISSIMMEE FL 34744	

1a. Principal Place of Business Address
705 EAST OAK STREET, SUITE E KISSIMMEE FL 34744

2. Principal Place of Business	2a. Mailing Address	3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.	Suite, Apt. #, etc.	03/10/1998	WA
City & State	City & State	4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent/Office
WILLIAMS, JIMMIE D 705 EAST OAK STREET, SUITE E KISSIMMEE FL 34744	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, etc.
	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) (NOT: Registered Agent Signature Required When Transferring)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	WILLIAMS, JIMMIE D	705 EAST OAK STREET, SUITE	KISSIMMEE FL
MGRM	GUMPert, RICHARD A	742 FIRST STREET SOUTH	KIRKLAND WA
MGRM	GUMPert, STEVEN L	1216 NORTH TUSTIN STREET	ORANGE CA

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****188.75 ****188.75

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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: Steven L. Gumpert

4-8-99

5. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, MEMBER OR MANAGER

Date

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