


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 MAY -3 PM 5:00 SECRETARY OF STATE	
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 # M98000000430					
PESCO INTERSTATE, L.L.C. 1200 EAST PARK AVENUE TALLAHASSEE FL 32301				1a. Principal Place of Business Address 1200 EAST PARK AVENUE TALLAHASSEE FL 32301	
2 Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 04/29/1998 3a. State of Formation DE 4. FEI Number 59-3504792 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
7. Name and Address of Current Registered Agent GEIGER, JAMES W 1200 EAST PARK AVENUE TALLAHASSEE FL 32301			8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code		
GEIGER, JAMES W 1200 EAST PARK AVENUE TALLAHASSEE FL 32301			000002870010 - 2 -05/10/99--01134 -013 ****188.75 ****188.75 FL		
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when being changed)</small>				DATE _____	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code		
MGR	GEIGER, JAMES W	1220 EAST PARK AVENUE	TALLAHASSEE FL		
MGR	LEE, ROBERT F	118 N. MONROE	TALLAHASSEE FL		
MGR	MORTIMER, PHILLIP T	P.O. BOX 800734	AVENTURA FL		
MGR	SMITH, PETER D	1220 EAST PARK AVENUE	TALLAHASSEE FL		
MGR	EALY, WILLIAM	2610 WYCLIFF ROAD	RALEIGH NC		
MGR	BOST, JOE	2610 WYCLIFF ROAD	RALEIGH NC		

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:

James W. Geiger

4/30/99

850/425-1100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER FOR MATERIAL

DATE

Telephone Number