



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 16 PM 4: 32 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		DOCUMENT # M98000000717			
1. Name and Mailing Address of Limited Liability Company 2480 LAKEVIEW DRIVE, LLC 100 HINMAN STREET CHESHIRE CT 06410		1a. Principal Place of Business Address 100 HINMAN STREET CHESHIRE CT 06410			
2. Principal Place of Business 27401 Country Club Dr. Suite, Apt. #, etc.		2a. Mailing Address 27401 Country Club Dr. Suite, Apt. #, etc.		3. Date Organized or Qualified 07/06/1998	
City & State Bonita Springs FL Zip 34134		City & State Bonita Springs FL Zip 34134		3b. State of Formation CT	
4. FE Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		5. Date of Last Report	
7. Name and Address of Current Registered Agent CONROY, J. THOMAS III MORRISON & CONROY, P.A. 3838 TAMiami TRAIL NORTH, SUITE 402 NAPLES FL 34103		8. Name and Address of New Registered Agent/Office 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			
10. Title Managing Members/Managers Business Street Address City, State and Zip Code					
MGR		NICHOLSON, ALEXANDER W		27401 COUNTRY CLUB DRIVE	
				BONITA SPRINGS FL	
700002820717-0 -03/28/99-0115-082 ****188.75 ****188.75 SL 3-22-99					
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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 an attachment with an address.					
SIGNATURE:		Signature:  Alexander W. Nicholson Jr. 3/2/99 (91) Title: _____ Date: 07-01-22			