LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTM Katherine Secretary DIVISION OF CO					rine h tary of	<b>larris</b> State	STOPE TARY OF STATE  DIVIDING COMPURATIONS  SOUTH A COMPURATIONS		
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE							1	21: 179	1.1 5/ 15
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9800000815							ĺ		
OCEAN PARK, LLC							1a. Principal Place of Business Address		
592 SOUTH THIRD STREET COLUMBUS OH 43215							592 SOUTH THIRD STREET COLUMBUS OH 43215		
2 Principal Place of Business 2a. Mail			ng Address			3. Date Organize	d or Qualified	3a. State of Formation	
Suite, Apt. #, etc. Suite,			Suite An	ite, Apt. #, etc.			07/27/1	998	ОН
			Joile, Ap	, Αρι. #, 616.			4. FEI Number		Applied For
City & State			City & State				31-1603172		Not Applicable
Zip	ip Country		7ip Coun		Countr	у	5. Date of Last R	eport	Certificate of Status Desired     S8 75 Additional Fee Required
7. Name and Address of Current Registered			Agent 8			Name and Address of New Regis			
DTW		<del></del>				Name			
BINNING, BOYD J 2115 N. OCEAN BLVD.				Street Address (P.		P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33305				Suite, Apt. #, etc.					
				Suite, Apr. #, ott.			•		
				City			Zip Code		Zip Code
its register	ed office or regis							bmits this state	ment for the purpose of changing s. I hereby accept the appointment
SIGNATU	RE						, 1	ΑΤ <u>.</u>	
10. Title Managing Members/Managers			OIL Registered Agent signature required when reits family  Business Street Address			(IF	City, State and Zip Code		
MGR	BINNING, PENELOPE			592 S. THIRD ST.				COLUME	BUS OH
MGR	BINNING, BOYD J			592 S. THIRD ST.				COLUMBUS OH	
MEM	EM SPANGLER, LEROY A			7445 CUMMINS CT			NEW ALBANY OH		
				}					
				}			SHO	นาบบุเล	າຄດດດຸດຊອ ເ
									9/9901092025 188.75 ****188.75

11. Ido 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: