File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED SECRETARY OF STATE **Katherine Harris** ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1999 DIVISION OF CORPORATIONS FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee 99 MAY 24 AM II: 12 Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 188.75 Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000000976** 1a. Principal Place of Business Address BATTERY CREEK STEVEDORING, L.L.C. 2735 FRONT STREET 2735 FRONT STREET GEORGETOWN SC 29442 GEORGETOWN SC 29442 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 09/08/1998 SC Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 57-1039966 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Žιρ Country Zip Country \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office COLLINS, PERRY R 13251 EASTERN AVENUE Street Address (P.O. Box Number is Not Acceptable) FORT MANATEE-PALMETTO FL 34221 Suite Ant # etc. 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 pur: sost 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. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE. (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when renaturing) 10. Title **Business Street Address** City, State and Zip Code Managing Members/Managers MGRM COLLINS, PERRY R 2735 FRONT STREET GEORGETOWN SC -06/02/99--01046--011 \*\*\*\*188.75 \*\*\*\*188.75

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attachment with an address SIGNATURE:

IRE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER.

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

4/29/99 10 Date of times