File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 HAR 19 PH 3: 09 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARY LA STATE TALLAHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000001006** CMB GENERAL PARTNER, LLC 1900 INTERNATIONAL PARK DRIVE, SUITE 100 1900 INTERNATIONAL PARK DRIV BIRMINGHAM AL 35243 BIRMINGHAM AL 35243 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 09/14/1998 AT. Suite Apt. #. etc. Suite Ant # etc 4. FEI Number Applied For 63-120 2744 City & State City & State Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zio 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 GREENHUT, DUDLEY H 23 SOUTH A STREET Street Address (P.O. Box Number is Not Acceptable) PENSACOLA FL 32574 <u>300002824443---</u>9 - 03/30/99--01100--003 \*\*\*\*188.75 \*\*\*\*188.75 City 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** (Registered Agent Accepting Applications 1) (1901) Registered Agent signature required whereign subtrings 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code 1900 INTERNATIONAL PARK DR BIRMINGHAM AL 35243 JOHNSON, JAMES MILTON MGR SUITE 100 93.25-99 11 I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (1), 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: