


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	
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 # M98000001288 HIGHWAY 92 GROUP, L.L.C. 1900 INTERSTATE BLDG., 121 W. TRADE ST. CHARLOTTE NC 28202		1a. Principal Place of Business Address 1900 INTERSTATE BLDG., 121 W CHARLOTTE NC 28202	
2. Principal Place of Business 121 W. Trade St. Suite, Apt. #, etc. Ste 2550 City & State Charlotte, NC Zip 28202 Country Meck	2a. Mailing Address 121 W. Trade St. Suite, Apt. #, etc. Ste 2550 City & State Charlotte, NC Zip 28202 Country Meck	3. Date Organized or Qualified 11/02/1998	3a. State of Formation DE
		4. FEI Number 31-6401653	<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 CORPORATION SERVICE , COMPANY 1201 HAYS STREET 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 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 _____	
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	NORWOOD, PHILIP W	1900 INTERSTATE BLDG., 121	CHARLOTTE NC
MGR	SESLER, RICHARD G	1900 INTERSTATE BLDG., 121	CHARLOTTE NC
MGR	JACKSON, ALLEN S	1900 INTERSTATE BLDG., 121	CHARLOTTE NC
MGR	JACKSON, ALLEN S	1900 INTERSTATE BLDG., 121	CHARLOTTE NC
MGR	MCCOY, J. MARTIN	1900 INTERSTATE BLDG., 121	CHARLOTTE NC
3000002865829--B -05/05/99--01097--013 ****188.75 ****188.75			
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER			
Date _____ Daytime Phone # _____			