2 nd and File on or before Sept. 29, 199	99 or Limited Liability	y Company		
FINAL NOTICE: will be dissolved. LIMITED LIABILITY COMPANY ANNUAL REPORT 1999	CLORIDA DEPARTMENT Katherine Harr Secretary of State DIVISION OF CORPORE	ris te	FILED 99 AUG -4 PH 4: (12
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE			SECRETARY OF STA	1
Name and Malling Address of Limited Liability Company DOCUMENT # M98000001475			ALLAHASSEE FLOR	IDA
OCEAN CLUB REALTY, LLC 755 CRANDON BOULEVARD 169 MIRACLE MILE REY BISCAYNE PL 33149 SUITE 200 CORAL GABLES, FL 33134			1a. Principal Place of Business Address 75.3 \$55 CRANDON BOULEVARD KEY BISCAYNE FL 33149	
	GABles, FL	33134	3. Date Organized or Qualified	3a. State of Formation
2 Principal Place of Bysiness Place of Bysiness Place Hile Suite, Apt. *, etc. Suite 200		12/10/1998 4. FEI Number 36-3375286	DE Apolied For	
City & State RISCAUND FL Sight & ST	1 Greles.	FL	ADPLIED FOR 5. Date of Last Report	Not Applicable 6. Certificate of Status Desired
33/49 (15A 33	134 Country	ISA		58 75 Additional Fee Required
7. Name and Address of Current Registered	Agent	8. h	lame and Address of New Reg	stered Agent/Office
WALKER, H. WILLIAM JR. 200 S. BISCAYNE BOULEVARD, MIAMI FL 33131.	SUITE 490	treet Address (A 69 Apr. #, etc. Swit	O, Box Number is Not Accepted 1/RAC/R)
	1 (Connl	GABLES FL	
9. Pursuant to the provisions of Sections 608.418 and 608.50 its registered office or registered agent, or both, in the State of Francisco as registered agent, and accept the originations	3, Florida Statutes, the above orida. Such change was author	e-named limited orized by affirma	2	nterment for the purpose of changing ers. I hereby accept the appointment
SIGNATURE (Registered Agent Accepting Appointment)		guired when reinstaling Street Address	DATE	ty, State and Zip Code
Managing Members/Managers MGR OCEAN CLUB DEVELOPMEN				
	D	F0=	***	2957249: /11/9901073007 **588.75 ****588.75
	1	ECEN	VED	
	THE	IUL 121 OCEAN	1999	
		- OCEAN	CLUB	
11. I do hereby certify that the information supplied with this filing indicated on this annual report is true and accurate and that my limited liability company or the receiver or trustee empowered attachment with an address.	b execute this report as requ			
SIGNATURE:	nold Will	ver on white	1/20/99	(305) 444-230 Daysing Photo #
SIGNATURE AND TYPE O OR PRINTEE INHSE 10 R (6/99) DOWN 1	DNAME OF SIGNING MANAGING MEI		TREASURER	