


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILED <i>4/24</i> 98 APR 27 AM 9:45 SECRETARY OF STATE TALLAHASSEE FLORIDA					
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 # Z00165			
ARBOR APARTMENTS, L.C. P.O. BOX 90015 GAINESVILLE FL 32607		1a. Principal Place of Business Address 2411 S.W. 25TH PLACE GAINESVILLE FL 32608			
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/27/1989	
City & State		City & State		4. FEI Number	
Zip		Zip		59-3005379	
Country		Country		5. Date of Last Report	
				05/01/1997	
7. Name and Address of Current Registered Agent		3a. State of Formation			
GODOWN, DOUGLAS R 2115 NW 38TH DR GAINESVILLE FL 32605		FL			
		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>			
		8. Name and Address of New Registered Agent/Office			
		Name			
		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City			
		Zip Code			
		FL			
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MB	BANTA, BRADFORD C	1409 MIDDLE RIVER DR		FT LAUDERDALE FL	
MB	BANTA, CATHERINE M	1409 MIDDLE RIVER DR		FT LAUDERDALE FL	
MB	BANTA, MARY L	1425 MIDDLE RIVER DR		FT LAUDERDALE FL	
MB	GODOWN, DOUGLAS R	2115 NW 38TH DR		GAINESVILLE FL	
MB	GODOWN, ILEANA J	2115 NW 38TH DR		GAINESVILLE FL	
				200002512062--S -05/05/98--01135--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: *AK Gm*

SIGNATURE AND TYPE (OR PRINTED NAME) OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #