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 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address of Limited Liability Company BCR MARINE, L.C. 95 MARINA COVE VILLAGE NICEVILLE FL 32578						FILED CO APR - 9 Pi; 5: 00 SIGNATURE SIGNATURE 1a. Principal Place of Business Address 95 MARINA COVE VILLAGE NICEVILLE FL 32578				
2 Princip	al Piace of Business	ailing Address	ng Address			3. Date Organized or Qualified 3a. State of Formation				
·				•			04/23/1991		FL	
Suite, Apt. #, etc. Suite, Ap			Apt. #, etc.	it. #, etc.			per			
Ch. C			State				Applied			
City & State			ity & State			59-3093638			Not Applicable	
Zip	Country	Zip		ountry		5. Date of La	ast Report	6. Certif	icate of Status Desired	
						04/06	/1998	\$8.75 Add	ditional Fee Required	
	7. Name and Address of Curren	Register	ed Agent		8. 1	·	tress of New Regis	tered Age	nt/Office	
95 MARINA COVE VILLAGE NICEVILLE FL 32578 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the abits registered office or registered agent, or both, in the State of Florida Such change was au as registered agent, and accept the obligations.										
SIGNATURE										
10. Title	0. Title Managing Members/Managers			Business Street Address			City, State and Zip Code			
м	GIBBONS, JOHN R. GUEST, BARNIE L.		95 MARII			LAGE	NICEVI NICEVI ODDITICI O4/1 *****	LLE 1342	FL	
11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther 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.										

(850) 897-3534

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