


FILE NOW: Fee after May 1, will be \$588.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company DOCUMENT #Z00500 FOUR SEAGATE MANAGEMENT COMPANY L.C. C/O MICHAEL REALTY SERVICES 300 MADISON AVE. TOLEDO OH 43604
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1a. Principal Place of Business Address C/O MICHAEL REALTY SERVICES 300 MADISON AVE. TOLEDO OH 43604

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address 132 W. Second Street Suite B Perryburg, OH Zip Country	3. Date Organized or Qualified 12/11/1991	3a. State of Formation FL
		4. FEI Number 34-1694717	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report 04/17/1996	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 3751 WEST BROWARD BLVD. PLANTATION FL 33324	8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 300002123183--S -03/25/97--01037--022 City Perryburg, OH Zip Code 43551 FL
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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
M	STRANAHAN, STEPHEN	6TH FL, FOUR SEAGATE 132 W. Second Street	TOLEDO OH Perryburg, OH 43551
M	STRANAHAN, ANN	6TH FL, FOUR SEAGATE 132 W. Second Street	TOLEDO OH Perryburg, OH 43551
M	STRANAHAN, DUANE JR.	4001 N. TAMiami TRAIL	NAPLES FL
MB	STRANAHAN, DUANE SR.	6TH FL, FOUR SEAGATE 132 W. Second Street	TOLEDO OH Perryburg, OH 43551
MB	STRANAHAN, ROBIN	6TH FL, FOUR SEAGATE 4001 N. TAMiami Trail	TOLEDO OH Naples, FL
MB	STRANAHAN, STEPHEN S	6TH FL, FOUR SEAGATE 132 W. Second Street	TOLEDO OH Perryburg, OH 43551

D. Allen 3/24/97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), 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:  419-872-4620
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #