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
Sacretary of State

Secretary of State
DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$189.75 Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$189.75 Annual Malling Address of Current Registered Agent City & State Country PALM HARBOR LANDHOLDINGS, L.C. 34041 US HWY. 19 N SUITE E PALM HARBOR FL 34684 2 Principal Place of Business 2 a. Mailing Address 3. Date Granted or Qualified 3. State of Formation Sulfs, Apr. 4, etc. City & State 2 59-3139583		199	98	Canalia .	DIVISION (OF COR	PORATION	IS		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		W14 C1	
Substitute Sub	FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee								98 MAR 11 AM 8: 59				
PALM HARBOR LANDHOLDINGS, L.C. 34041 US HWY. 19 N SUITE E PALM HARBOR FL 34684 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2a. Mailing Address 2b. Mailing Address 2c. Mailing Add	\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE										·	-	
PALM HARBOR LANDHOLDINGS, L.C. 34041 US HWY. 19 N SUITE E PALM HARBOR FL 34684 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2a. Mailing Address 2b. Mailing Address 2c. Mailing Add	1. Name of Lim	and Malling Ad Ited Liability Co	ompany DOC	\sim	2/12/								
34041 US HWY. 19 N SUITE E PALM HARBOR FL 34684 2 Principal Place of Business 2a. Mailing Address 2a. Mailing Address 3. Date Organized or Qualified Suits, Apr. 4, etc. 5 Use, Apr. 4, etc. City & State City & State City & State City & State Country 7. Name and Address of Current Registered Agent Name CASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apr. 4, etc. Street Address (P.O. Box Number And Aprentable Size Of Portice Stuth Change was authorized by effirmative vote of a majority of the members. In erisby accept the epipatiment are registered again, and accept the obligations. Signature M KORNFELD, STEPHEN J. 34041 US 19 N. SUITE B PALM HARBOR FL	200041							-	1a. Principal Place of Business Address				
SUITE E PALM HARBOR FL 34684 2 PALM HARBOR FL 34684 3 Date Organized or Qualified 3 Set State of Formation 0 8/31/1992 FL 4 FEI Number Applied For Suite, Apr. #, etc. City & State Suite, Apr. #, etc. City & State Suite, Apr. #, etc. Country Zip Country C									•				
PALM HARBOR FL 34684 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 8ulfa, Apt. #, etc. Sulfa, Apt. #, etc. City & State City & State City & State Country 7. Name and Address of Current Registered Agent Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent/Office Name GASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 8. Pursuant to the provisions of Sections 608 416 and 608 508. Florida Statules, the above-named limited liability company submits this statement for the purpose of changing its registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appendications) Managing Members/Managers PALM HARBOR FL 34684 3. Date Organized or Qualified 3a. State of Formation 08/31/1992 FL Applied For Applied For Applied For Applied For Applied For Applied For Applied For Date of Last Report Country Applied For Date of Last Report Country Applied For Appli													
2. Principal Place of Business 2. Mailing Address 3. Date Organized or Qualified 08. State of Formation 08/31/1992 4. FEI Number 08/31/1992 4. FEI Number 09/31/39583 5. Date of Last Report 09/31/39583 6. Date of Last Report 09/31/39583 7. Name and Address of Current Registered Agent 09/31/3997 7. Name and Address of Current Registered Agent 09/31/3997 7. Name and Address of Current Registered Agent 09/31/3997 7. Name and Address of Current Registered Agent 09/31/3997 8. Name and Address of New Registered Agent 09/31/3997 8. Name and Address of New Registered Agent 09/31/3997 8. Name and Address of New Registered Agent 09/31/3997 8. Street Address (P.O. Box Number And Agentable) 55/3988 8. Street Addre													
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Sp-3139583 Not Applied For Sp-3139583 Sp-3139583 Not Applied For Sp-3139583 Not Applied For Sp-3139583 Sp-3139583 Not Applied For Sp-3139583 Sp-3	From Mindon ED 34004												
City & State Country Country Country Country Country T. Name and Address of Current Registered Agent Registered Agent Registered Agent Registered Agent Respons Street Address of New Registered Agent/Office Name CASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apt. #, etc. *******188.75 ******188.75 ******188.75 ******188.75 City Cit	2. Princip	al Place of Bus	siness	2a. Mail	ing Address			+	3. Date Org	anized or Qualified	3a. State	of Formation	
City & State Country Country Country Country Country T. Name and Address of Current Registered Agent Registered Agent Country T. Name and Address of New Registered Agent/Office Name GASSMAN, ALAN S. 1212 COURT ST. Street Address (P.O. Box Number Is Not Accented 5 5 3 1 3 5 3					•								
City & State City & State City & State Country Countr	Suite, Ap	. #, etc.		Sulte, Ap	t. #, etc.				1 U8/31/1992 4. FEI Number		<u> </u>		
Sp-3139583 Not Applicable Not Applicable Sp-3139583 Not	AL. 6 AL											Applied For	
7. Name and Address of Current Registered Agent 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name GASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apt. #, etc. ******188.75 ******188.75 City Lip Code F. City Lip 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 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. SKONATURE [flugulatered Agent Accepting Appointment] (NOTE Registered Agent signature required when remotating) 10. Title Managing Members/Managers Business Street Address City, State and Zip Code M KORNFELD, STEPHEN J. 34041 US 19 N. SUITE D PALM HARBOR FL M DRUCKER, JERRY 34041 US 19 N. SUITE B PALM HARBOR FL M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL	City & State City & St				A10 .							Not Applicable	
7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name GASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apt. #, etc. ******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 *******188.75 ********188.75 *******188.75 *******188.75 *******188.75 *******188.75 ********188.75 *********188.75 ***********************************	Zip		Country	Zip	Country				5. Date of U	ast Report	6. Certificate of Status Desired		
7. Name and Address of New Registered Agent/Office RASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apt. #, etc. PL Zip Code Suite, Apt. #, etc. Site and Si						02/27/		/1007	S8-75-Additional Lee Reguired				
GASSMAN, ALAN S. 1212 COURT ST. SUITE B CLEARWATER FL 34616 Suite, Apt. #, etc. Street Address (P.O. Box Number is Not Accepted 133-113-116) Suite, Apt. #, etc. #####188.75 Street Address (P.O. Box Number is Not Accepted 133-113-116) Suite, Apt. #, etc. #####188.75 Street Address (P.O. Box Number is Not Accepted 133-113-116) Suite, Apt. #, etc. #####188.75 Street Address (P.O. Box Number is Not Accepted 133-113-116) #####188.75 Street Address (P.O. Box Number is Not Accepted 133-113-116) Suite, Apt. #, etc. #####188.75 Street Address (P.O. Box Number is Not Accepted 133-113-116) Suite, Apt. #, etc. #####188.75 Stip Code *####188.75 City Stip Code *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *####188.75 *#####188.75 *#####188.75 *#####188.75 *#####188.75 *###################################		7. Name	and Address of Curre	nt Registered	Agent	•		8. Na					
Street Address (P.O. Box Number Not Acceptable 3 5 5 3 13 3 - 4 - 03/12/38 - 01113 - 016							Name						
Suite, Apt. #, etc. #***188.75 *****188.75 Persuant 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							Street Add	ress (P.O	. Box Numl	er is Not Accenter	de)		
Suite, Apt. #, etc. ####188.75 ####188.75 City 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 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							800002455988 4						
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	" - *												
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							100:13 4444					*****100*10	
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							-,					``	
tis 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													
SIGNATURE	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												
10. Title Managing Members/Managers Business Street Address City, State and Zip Code	as registered agent, and accept the obligations.												
M KORNFELD, STEPHEN J. 34041 US 19 N. SUITE D PALM HARBOR FL M DRUCKER, JERRY 34041 US 19 N. SUITE B PALM HARBOR FL M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL	SIGNATU	RE	(Parislared Apon) Acceptu	a Appaniment) /6	MTE: Booksad A	ann) olanetu				DATE			
M KORNFELD, STEPHEN J. 34041 US 19 N. SUITE D PALM HARBOR FL M DRUCKER, JERRY 34041 US 19 N. SUITE B PALM HARBOR FL M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL	10. Title	· · · · · · · · · · · · · · · · · · ·								City	State and Zi	n Code	
M DRUCKER, JERRY 34041 US 19 N. SUITE B PALM HARBOR FL M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL			220,000 0.000,100,000										
M DRUCKER, JERRY 34041 US 19 N. SUITE B PALM HARBOR FL M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL		, ,	31D AMERIC	., -			10						
M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL	M	NOKNEELD, STEPHEN		N J.	J. 34041 US :			SUIT	ED	PALM H	ARBOR	FL	
M KAPLAN, KERRY 34041 US 19 N. SUITE A PALM HARBOR FL	м	DRUCKER, JERRY			34041	US	19 N.	SUIT	EΒ	PALM H	ARBOR	FI.	
			•										
M BRECHER, DAVID B. 34041 US 19 N. SUITE E PALM HARBOR FL	М	KAPLAN, KERRY			34041	US	19 N.	SUIT	EA	PALM H	ARBOR	FL	
	м	BRECHER, DAVID B.			34041	US	19 N	SULT	ज ज	PAT.M H	ARBOR	ਜਾ.	
		•					•11						
M PLEVIN, SANFORD N. 34041 US 19 N. SUITE B PALM HARBOR FL	M	PLEVIN, SANFORD N.			34041	US :	19 N.	SUIT	EB	PALM H	ARBOR	FL	
M FERNANDEZ, RONALD 34041 US 19 N SUITE E PALM HARBOR FL	м	FERNANDEZ, RONALD			 34041 5 10 N 511T#			it T m v	· 10*	DATM "	7000K	To T	
M FERNANDEZ, RONALD 34041 US 19 N SUITE E PALM HARBOR FL	44	EBRIMINDEZ, KONALD			34041	UD .	TA N D	OTTE		LATM H	MUDAM	τπ	
		. •											
		<u> </u>									•••		

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. 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 flability 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

9/88 80/ Daytime Phone #