File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris FHLED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 00 APR -5 FH 5: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 200682** 1a. Principal Place of Business Address NUTTING L.C. 1500 BEVILLE ROAD 1500 BEVILLE ROAD SUITE 606-213 SUITE 606-213 DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 10/27/1992 FLSuite, Apt. #, etc. Suite, Apl. #, etc 4. FEI Number Applied For City & State City & State 65-0367252 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country 210 \$8 75 Additional Fee Required 04/27/1998 8. Name and Address of New Registered Agent/Office 7. Name and Address of Current Registered Agent BROWN, WILLARD L 1500 BEVILLE RD. Street Address (P.O. Box Number is Not Acceptable) SUITE 606-213 DAYTONA BCH. FL 32114 Suite Apt. #, etc. 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 office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the mombers. I hereby accept the appointment as registered agent, and accept the obligations SIGNATURE DATE (flagistered Agent A. reptris) Appoint cold. (NOTE flagistered Agent signature respired when removing 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code М BROWN, W. L 1500 BEVILLE RD. STE. 606-DAYTONA BCH. FL М BROWN, E. 1500 BEVILLE RD. STE. 606 DAYTONA FL APR 1 4 19/3 T.J.C. 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 frustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an SIGNATURE:

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