

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037615

**FILED**  
**Jan 05, 2007**  
**Secretary of State**

**Entity Name:** MISSION CREEK OF FLORIDA, LLC

**Current Principal Place of Business:**

1350 SOUTH FRONTAGE ROAD  
HASTINGS, MN 55033

**New Principal Place of Business:**

**Current Mailing Address:**

1350 SOUTH FRONTAGE ROAD  
HASTINGS, MN 55033

**New Mailing Address:**

**FEI Number:** 73-1727485

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAKER, MARY ANN A  
6620 ESTERO BLVD.  
FT. MYERS BEACH, FL 33931 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHWARZHOFF, CHARLES A  
Address: 33130 58TH AVENUE PATH  
City-St-Zip: CANNON FALLS, MN 55009

Title: MGRM ( ) Delete  
Name: HOLLAR, NANCY  
Address: 4019 THOMAS AVNUE  
City-St-Zip: HASTINGS, MN 55033

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: CHARLES SCHWARZHOFF

MGRM

01/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date