

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012677

FILED
Mar 23, 2009
Secretary of State

Entity Name: PARK CREFOX, L.L.C.

Current Principal Place of Business:

C/O CREATIVE DEVELOPMENT CO., LLP
77 FRANKLIN ST.
BOSTON, MA 02110

New Principal Place of Business:

Current Mailing Address:

8359 BEACON BLVD
STE 205
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-1048459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, ALLAN E
8359 BEACON BLVD
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

FOX, ALLAN E
8359 BEACON BLVD
SUITE 205
FORT MYERS, FL 33907 US

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:

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CREATIVE DEV CO LLP,
Address: 77 FRANKLIN ST
City-St-Zip: BOSTON, MA

Title: MGRM () Delete
Name: FLORDECO INC,
Address: 8359 BEACON BLVD.
City-St-Zip: FT MYERS, FL

Title: P () Delete
Name: FINLEY, JOHN
Address: 77 FRANKLIN STREET
City-St-Zip: BOSTON, MA

Title: VP () Delete
Name: MAYNARD, CHARLOTTE
Address: 77 FRANKLIN STREET
City-St-Zip: BOSTON, MA

Title: ST () Delete
Name: FOX, ALLAN E
Address: 8359 BEACON BLVD
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: FLORDECO INC,
Address: 8359 BEACON BLVD., SUITE 201
City-St-Zip: FT MYERS, FL 33907

Title: P (X) Change () Addition
Name: FINLEY, JOHN
Address: 77 FRANKLIN STREET
City-St-Zip: BOSTON, MA 02110

Title: VP (X) Change () Addition
Name: MAYNARD, CHARLOTTE
Address: 77 FRANKLIN STREET
City-St-Zip: BOSTON, MA 02110

Title: ST (X) Change () Addition
Name: FOX, ALLAN E
Address: 8359 BEACON BLVD, SUITE 205
City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify 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: JOHN FINLEY

P

03/23/2009

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