

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000001387

1. Entity Name
WILLIAMSON CREEK VENTURE, L.C.



Principal Place of Business

6530 W. ROGERS CIRCLE
SUITE 31
BOCA RATON, FL 33487

Mailing Address

6530 W. ROGERS CIRCLE
SUITE 31
BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE



03082005No Chg-LLC

CR2E083 (10/03)

4. FEI Number

16-1637998

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KRONGOLD, RANDI M
201 ALHAMBRA CIRCLE
SUITE 801
CORAL GABLES, FL 33134

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
LEDER GROUP 2 INC
6530 W. ROGERS CIRCLE 31
BOCA RATON, FL 33487

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U000000315222
04/19/05-80027-002 50.00

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IN THIS SPACE**

11. I 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 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 606, Florida Statutes.

SIGNATURE:

SAMUEL E LEDER *Samuel E Leder* *4/11/05* *561-995-7878*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #