

FILED

Apr 09, 2002 8:00 am
Secretary of State

03-13-2002 90095 009 ****50.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000022561

1. Entity Name

CROSS CREEK ASSOCIATES, LLC

DO NOT WRITE IN THIS SPACE

22341

2. Principal Place of Business

1441 Manotak Avenue

3. Mailing Address

11330-1 St. Johns Ind Pk

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-1837810

Applied For

Not Applicable

Zip

32210-0182

Country

USA

Zip

32246

Country

USA

5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

John A. Hulsey

Street Address (P.O. Box Number is Not Acceptable)

11330-1 St. Johns Industrial Pkwy

City

Jacksonville

FL

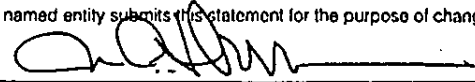
Zip Code

32246

**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.

SIGNATURE



John A. Hulsey, Managing Member 3-1-02

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

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	MANAGING MEMBER
NAME	JOHN A. HULSEY
STREET ADDRESS	11330-1 ST JOHNS IND PKWY
CITY-ST-ZIP	JACKSONVILLE, FL 32246

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	MANAGING MEMBER
NAME	NEIL E. ELSILA
STREET ADDRESS	11330-1 ST JOHNS IND PKWY
CITY-ST-ZIP	JACKSONVILLE, FL 32246

TITLE	
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**DO NOT WRITE
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 608, Florida Statutes.

SIGNATURE:



John A. Hulsey 3-1-02 904-565-1901

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

Date

Daytime Phone #

CR2E083B (12/01)