## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT # L02000001904

1. Entity Name BOYETTE CREEK, L.L.C.



FILED Apr 30, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2502 NORTH ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607 2502 NORTH ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607



03112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
03-0395576		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STROHAUER, GARY N ESQ BAXTER, STROHAUER, MANNION & SILBERMANN, P.A. 1150 CLEVELAND STREET STE. 300 CLEARWATER, FL 33755

# DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of character obligations of registered agent.	nging its registered office or registered agent, or bot	h, in the State of Florida. I am fa	amiliar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)		<u> </u>
EU E NAWIN EUG 19 \$430 75		05/27/08-80022-	

#### FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RYAN, JOHN M 2502 NORTH ROCKY POINT DRIVE STE. 1050 TAMPA, FL 33607
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11. I hereby	certify that the information supplied with this filling does not qualify for the e

# DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

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

rulpod nos

813-288-8078

Daytime Phone #