

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2005 8:00 am
Secretary of State

01-14-2005 90037 026 ****50.00

DOCUMENT # L02000008767

1. Entity Name
EAGLE CREEK PROPERTY MANAGEMENT, L.C.



Principal Place of Business
**14126 WHISPERWOOD DRIVE
CLEARWATER, FL 33762**

Mailing Address
**14126 WHISPERWOOD DRIVE
CLEARWATER, FL 33762**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102005

Chg-LLC

CR2E083 (10/03)

4. FEI Number
03-0444420

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**O'CONNOR & ASSOCIATES
2240 BELLEAIR ROAD, SUITE 160
CLEARWATER, FL 33764**

Name
DEPARTMENT OF STATE

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

City

FL

Zip Code

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 reissuing)

DATE

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MARINELLI, FRANK
14126 WHISPERWOOD DR
CLEARWATER, FL 33762** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
MARINELLI, PATRICIA
14126 WHISPERWOOD DR
CLEARWATER, FL 33762** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
POROSLAY, ADAM
14126 WHISPERWOOD DR
CLEARWATER, FL 33762** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
POROSLAY, ADAM ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
POROSLAY, GIZELLA
14126 WHISPERWOOD DR
CLEARWATER, FL 33762** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
POROSLAY, GIZELLA ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

[Signature]

1-11-05

727 527 7033

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

Date

Daytime Phone #