

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008767

FILED
Jul 16, 2009
Secretary of State

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

Current Principal Place of Business:

14126 WHISPERWOOD DRIVE
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

14126 WHISPERWOOD DRIVE
CLEARWATER, FL 33762

New Mailing Address:

24402 SR 54
LUTZ, FL 33559

FEI Number: 03-0444420 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MARINELLI, FRANK
Address: 14126 WHISPERWOOD DR
City-St-Zip: CLEARWATER, FL 33762

Title: MGR () Delete
Name: MARINELLI, PATRICIA
Address: 14126 WHISPERWOOD DR
City-St-Zip: CLEARWATER, FL 33762

Title: MGR () Delete
Name: POROSLAY, ADAM
Address: 14126 WHISPERWOOD DR
City-St-Zip: CLEARWATER, FL 33762

Title: MGR () Delete
Name: POROSLAY, GIZELLA
Address: 14126 WHISPERWOOD DR
City-St-Zip: CLEARWATER, FL 33762

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

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

Title: MGR () Change (X) Addition
Name: POROSLAY, ADAM MGR
Address: 14126 WHISPERWOOD DRIVE
City-St-Zip: CLEARWATER, FL 33762

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: ADAM POROSLAY

MGR

07/16/2009

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