2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/1:

FILED
Jun 19, 2008 8:00 am
Secretary of State
05-15-2008 90075 003 ***138.75

30009611

DOCUMENT # L03000001958

1. Entity Name
CROSS CREEK REALTY, L.L.C.

Principal Place of Business	Mailing Address
3754 W. COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459 US	3754 W. COUNTY HWY 30-A SANTA ROSA BEACH, FL 32459 US

DO NOT WRITE IN THIS SPACE

04212008No Chg-LLC CR2E083 (12/07)

4. FEI Number
06-1677796

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

NOVAK, THOMAS V SR.
5524 MESSY TOP WAY
TALLAHASSEE, FL 32303

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

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

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	JASIN, DAVID A
STREET ADDRESS	3754 W. COUNTY HWY 30-A
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	MGRC
NAME	CALDWELL, DONALD A
STREET ADDRESS	3754 W. COUNTY HWY 30-A
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: _____ 6/18/08 8505855719
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #