

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 30, 2005 8:00 am**  
**Secretary of State**

03-30-2005 90161 042 \*\*\*\*50.00

DOCUMENT # L03000004504

1. Entity Name  
TYMBER CREEK PLAZA, LLC



Principal Place of Business  
1030 W. INTERNATIONAL SPEEDWAY BOULEVARD  
DAYTONA BEACH, FL 32114

Mailing Address  
1030 W. INTERNATIONAL SPEEDWAY BOULEVARD  
DAYTONA BEACH, FL 32114

20025307



2. Principal Place of Business  
444 SEABREEZE BLVD.

3. Mailing Address  
444 SEABREEZE BLVD.

Suite, Apt. #, etc.  
STE 1000

Suite, Apt. #, etc.  
STE 1000

City & State  
DAYTONA BEACH, FL

City & State  
DAYTONA BEACH, FL

Zip  
32118

Zip  
32118

03032005 Chg-LLC CR2E083 (10/03)

4. FEI Number  
56-2315715

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
TOWER, DEVIN  
1030 W. INTERNATIONAL SPEEDWAY BOULEVARD  
DAYTONA BEACH, FL 32114

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
444 SEABREEZE BLVD.  
STE 1000  
City, FL Zip Code  
DAYTONA BEACH FL 32118

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	MGRM HOLUB, PAUL F JR. 675 N. BEACH STREET ORMOND BEACH, FL 32174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LIGHTCO LIMITED PARTNERSHIP 1030 W. INTERNATIONAL SPEEDWAY BOULEVARD DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 444 SEABREEZE BLVD. STE 1000 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOWER, DEVIN TRUSTEE 1030 W. INTERNATIONAL SPEEDWAY BOULEVARD DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 444 SEABREEZE BLVD. STE.1000 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_