## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

## DOCUMENT # L03000013305

1. Entity Name

SETTLER'S CREEK OF CENTRAL FLORIDA, L.L.C.



FILED Mar 24, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1420 S. FLORIDA AVENUE LAKELAND, FL 33803 1420 S. FLORIDA AVENUE LAKELAND, FL 33803



03012005 No Chg-LLC

CR2E083 (10/03)

Daytime Phone #

4. FEI Number 14-1882371 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARPER, PAUL SEAN 1420 S. FLORIDA AVENUE LAKELAND, FL 33803

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>			
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			
g,	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HARPER, PAUL SEAN 1420 S. FLORIDA AVENUE LAKELAND, FL 33803		_U00000274624 03/24/U5-80019-014 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN .	THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٨		<del></del>
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			