

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052453

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: MILL CREEK LLC

**Current Principal Place of Business:**

12273 EMERALD COAST PARKWAY  
SUITE 204  
DESTIN, FL 32550 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 456  
DESTIN, FL 32550

**New Mailing Address:**

FEI Number: 20-0877631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPEARS, TIM D  
12273 EMERALD COAST PARKWAY  
SUITE 204  
DESTIN, FL 32550 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: SPEARS, TIM D  
Address: 12273 EMERALD COAST PARKWAY, SUITE 204  
City-St-Zip: DESTIN, FL 32550

Title: MGRM ( ) Delete  
Name: BARTON, JAMES L  
Address: 12273 EMERALD COAST PARKWAY, SUITE 204  
City-St-Zip: DESTIN, FL 32550

Title: MGRM ( ) Delete  
Name: BINKLEY, ROSS S  
Address: 12273 EMERALD COAST PARKWAY, SUITE 204  
City-St-Zip: DESTIN, FL 32550

Title: MGRM ( ) Delete  
Name: MAINOR, JAMES B  
Address: 12273 EMERALD COAST PARKWAY, SUITE 204  
City-St-Zip: DESTIN, FL 32550

Title: MGRM ( ) Delete  
Name: GUSTIN, JOHN C IV  
Address: 12273 EMERALD COAST PARKWAY, SUITE 204  
City-St-Zip: DESTIN, FL 32550

Title: MGRM ( ) Delete  
Name: BINKLEY, ALLEN S  
Address: 1064 COLUMBIANA ROAD  
City-St-Zip: BIRMINGHAM, AL 35209

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES B. MAINOR

MGRM

01/04/2006

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