

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053184

FILED
Jun 05, 2007
Secretary of State

Entity Name: SPRING CREEK PROPERTIES, LLC

Current Principal Place of Business:

P.O. BOX 4012
TALLAHASSEE, FL 32315 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4012
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 20-0494182 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:

BURNS, WILLIAM B
6320 GLASGOW DR.
TALLAHASSEE, FL 32312 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: MGRM () Delete
Name: BURNS, WILLIAM B
Address: 6320 GLASGOW DR.
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: BOND, WILLIAM H JR.
Address: 10631 LAKE IAMONIA DR.
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: TROTMAN, HERSHEL L II
Address: 703 VONCILE AVE.
City-St-Zip: TALLAHASSEE, FL 32303 US

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: MGRM () Change (X) Addition
Name: KRAUSE, MATTHEW K
Address: 1123 HAWTHORNE ST.
City-St-Zip: TALLAHASSEE, FL 32308

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: WILLIAM B BURNS

MGRM

06/05/2007

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