2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 04, 2008
Secretary of State

DOCUMENT# L03000053184

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	(X) Delete
Name:	TROTMAN, HERSHEL L II	
Address:	703 VONCILE AVE.	
City-St-Zip:	TALLAHASSEE, FL 32303 US	
Title:	MGRM	( ) Delete
Name:	KRAUSE, MATTHEW K	
Address:	1123 HAWTHORNE ST.	
City-St-Zip:	TALLAHASSEE, FL 32308	

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:	

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 06/04/2008

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