

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000002800

Entity Name: MILL CREEK ROAD, L.L.C.

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2560 STATE ROAD 16  
ST AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

921 SOUTH FORREST CREEK DRIVE  
ST AUGUSTINE, FL 32092

**New Mailing Address:**

2560 STATE ROAD 16  
ST AUGUSTINE, FL 32092

FEI Number: 20-0581261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, VIJAY  
921 SOUTH FORREST CREEK DRIVE  
ST. AUGUSTINE, FL 32092 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  
Name: PATEL, VIJAY  
Address: 921 SOUTH FORREST CREEK DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR  
Name: PATEL, MITA  
Address: 2560 STATE ROAD 16  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR  
Name: PATEL, BHARTI  
Address: 2560 STATE ROAD 16  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR  
Name: PATEL, DHARMENDRA  
Address: 2560 STATE ROAD 16  
City-St-Zip: ST. AUGUSTINE, FL 32092

I hereby 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: VIJAY PATEL

MGRM

04/07/2012

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