

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024241

Entity Name: CREECH ROAD, L.L.C.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

3337 TAMIAMI TRAIL N.
NAPLES, FL 34103

New Principal Place of Business:

3400 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34103

Current Mailing Address:

3337 TAMIAMI TRAIL N.
NAPLES, FL 34103

New Mailing Address:

3400 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34103

FEI Number: 55-0862019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANT, SCOTT M
3337 TAMIAMI TRAIL N.
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

GRANT, SCOTT M
3400 TAMIAMI TRAIL NORTH
SUITE 201
NAPLES, FL 34103 US

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:

03/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BURKE, ROBERT F
Address: 402 NORTH FALMOUTH HIGHWAY
City-St-Zip: NORTH FALMOUTH, MA 02556

Title: MGR () Delete
Name: GRANT, SCOTT M
Address: 3337 TAMIAMI TRAIL N.
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: GRANT, SCOTT M
Address: 3400 TAMIAMI TRAIL NORTH, SUITE 201
City-St-Zip: NAPLES, FL 34103

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: SCOTT M. GRANT

MGR

03/30/2009

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