

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031950

FILED  
Jan 12, 2007  
Secretary of State

Entity Name: CREEKWOOD ESTATES, LLC

**Current Principal Place of Business:**

4014 GUNN HWY, STE 250  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

4014 GUNN HWY, STE 250  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 03-0542179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDREWS, JANA ESQ  
ANDRES & LINS, P.A.  
711 W. FLETCHER AVE, STE B  
TAMPA, FL 33612 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: SKESTOS, GEORGE A  
Address: 750 NORTHLAWN DR  
City-St-Zip: COLUMBUS, OH 43214

Title: MGRM ( ) Delete  
Name: MOBLEY, TIMOTHY F  
Address: 4014 GUNN HWY, STE 250  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES:**

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: TIMOTHY F MOBLEY

MGRM

01/12/2007

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