

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048459

FILED
May 01, 2008
Secretary of State

Entity Name: BOGGY CREEK COMMERCIAL DEVELOPMENT, LLC

Current Principal Place of Business:

950 S WINTER PARK DRIVE
SUITE 350
CASSELBERRY, FL 32707 US

New Principal Place of Business:

870 SUNSHINE LANE
ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address:

950 S WINTER PARK DRIVE
SUITE 350
CASSELBERRY, FL 32707 US

New Mailing Address:

870 SUNSHINE LANE
ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 20-1513608 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:

HAGEN, DEBORAH D
950 S WINTER PARK DRIVE
SUITE 350
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

NICHOLSON, ANTHONY J
870 SUNSHINE LANE
ALTAMONTE SPRINGS, FL 32714 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: ANTHONY J NICHOLSON

05/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NICHOLSON USA PROPER, TIES INC
Address: 870 SUNSHINE LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM () Delete
Name: HAGEN, TERRY D
Address: 950 S. WINTER PARK DRIVE, SUITE 350
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGRM (X) Delete
Name: HAGEN, DEBORAH D
Address: 950 S. WINTER PARK DRIVE, SUITE 350
City-St-Zip: CASSELBERRY, FL 32707 US

ADDITIONS/CHANGES:

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

Title: M (X) Change () Addition
Name: D R SUTTON ENTERPRIS, ES
Address: 2218 ROWENA AVE
City-St-Zip: ORLANDO, FL 32803

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: ANTHONY J NICHOLSON

MGRM

05/01/2008

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