2005 LIMITED LIABILITY CO

FILED

		AN N	UAL RE	<u>EPOR</u>	T	eb 08. 2	005 8:00	am
DOCUM	IENT # L0400006	0228				Co vota	w. of \$401	40
1. Entity Name					l		ry of Stat	
DAWSON'S	S CREEK , L.L.C.			!	02-08-2005 9	0079 023 ***150.0	ıO	
Principal Piace o	of Rusinaes	Mailing Address						
Principal Place of Business 1010 THE BLACKSTONE BUILDING		1010 THE BLACKSTONE BUILDING		1				
233 EAST BAY STREET		233 EAST BAY STREET]
JACKSONVILLE, FL 32202		JACKSONVILLE, FL 32202					0008499	
2. Principal Place of Business		3. Mailing Address						
		`						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01142005	Chg-LLC	CR2E083 (10/03))
City & State		City & State			4. FEI Num	ber	- Ac	oplied For
						2		Not Applicable
Zip	Country	Zip	Country				\$5.00 Ad	dditional
	C Name and Address of Comment	Basistand Asset	<u> </u>			of Status Desired	Fee Require	d
	6. Name and Address of Current	redismiss valeur	Name	^		nd Address of New		
DEAS. WILL		CAR) AWSOW		- 		
2215 RIVER	Street	Address (P.	O. Box Numb	per is Not Acceptable	233 B. BAY	STREET		
	ILLE I L GEEGT		/	. 771.	. 1 6 .		•	
				the Blacksfore Building # 1010				
9 The sho		-1.1			son vil		FI 33	77 93
	ve named entity submits this stateme s of registered agent.	prior me pulpose or science	gus registered o	mice or regis	nereo agent, o	or both, in the State o	r Flonda. I am familiar wi	in, and accer
		()	7		7	•	•	
SIGNATURE SIGNATURE	nature, typed or printed name of registered agent	and title if applicable. (NOT	TE: Registered Agents	ignature require	d when reinstating)	DATE 237	
• • • •			anders of the second		,	34-1	a abaak sawahta ta	
Filing Fee is \$50.00 Due by May 1, 2005							e check payable to da Department of Sta	ate
		-	_ i t					•
9.	MANAGING MEMBE		10.			ADDITIONS/	CHANGES	
	MGRM DAWSON DEVELOPMENT COM	Delete MPANY, INC.	NAME	Change				Additio
STREET ADDRESS 233 EAST BAY ST., 1010 BLACKSTONE BLDG. STRI				s				
спу-ет-др	IACKSONVILLE, FL 32202		CITY-ST-ZIP					
TITLE		Delete	TITLE	Change				Additio
NAME STREET ADDRESS			NAME STREET ADDRES					
CITY-ST-ZIP			CTTY-ST-ZIP	"				
TILE		Delete	TITLE	Change				Additio
NAME -	, 		NAME				-	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	s				
TITLE			OTY-ST-ZIP	Change				Additio
NAME		Deleta	TITLE NAME	Change				AUGUO
STREET ADDRESS			STREET ADDRES	s				
CITY-ST-ZIP			CITY-ST-ZIP					
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NAME STREET ADDRESS	And the second s	• •	NAME STREET ADDRES					
OTY-ST-ZIP	A STATE OF THE STA	t." 3.83	CTTY-ST-ZIP	3		* : · · ·		
TTLE		Delete	TITLE	Change		· -		Additio
NAME	end growings		NAME			2 Mar. *	u nom luvu e pu oli suuri	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	s		٠.	<i>y.</i> • .	
	fy that the information supplied with the	his filing dogs not qualify for t	CITY-ST-ZIP	tod in Carti	on 110 07/2\/	Closida Ctatutas 14	indhae andife that the fact	
indicated on	this report is true and accurate and the	rat my signature shall have th	ne same legal effi	ect as if mad	le under oath	that I am a managin	ururer centity that the info g member or manager of	amation f the
limited liabilit	y company or the receiver or trustee	ampowered to execute this re	eport as required	by Chapter	608, Florida S	Statutes.	-	

SIGNATURE: