



**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000060228</b> 1. Entity Name <b>DAWSON'S CREEK, L.L.C.</b>	
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Principal Place of Business <b>1010 THE BLACKSTONE BUILDING 233 EAST BAY STREET JACKSONVILLE, FL 32202</b>	Mailing Address <b>1010 THE BLACKSTONE BUILDING 233 EAST BAY STREET JACKSONVILLE, FL 32202</b>
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**DO NOT WRITE IN THIS SPACE**



01292008No Chg-LLC      CR2E083 (12/07)

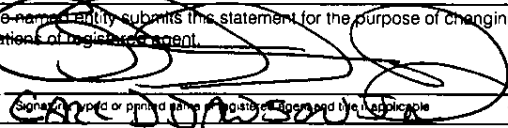
4. FEI Number <b>51-0520062</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**DAWSON, JR., CARL D  
233 BAY STREET  
THE BLACKSTONE BLDG #1010  
JACKSONVILLE, FL 32202**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **12908** DATE \_\_\_\_\_

Signature typed or printed name of registered agent and fee, if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

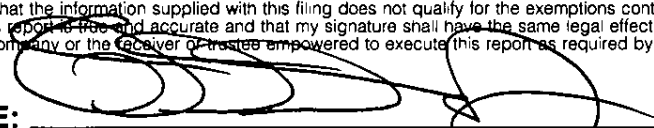
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM DAWSON DEVELOPMENT COMPANY, INC. 233 EAST BAY ST., 1010 BLACKSTONE BLDG. JACKSONVILLE, FL 32202</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**U00000808116**  
**02/07/08-80036-016 138.75**

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **12908 9043555505**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #