


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 18, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000079717</b>	
1. Entity Name <b>THE LAKE AT TURKEY CREEK DEVELOPMENT, LLC</b>	

Principal Place of Business <b>6531 NW 109TH PLACE ALACHUA, FL 32615</b>	Mailing Address <b>P.O. BOX 357688 GAINESVILLE, FL 32635-7688</b>
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**DO NOT WRITE IN THIS SPACE**



04162007No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>75-3197939</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>FRECK, JOSEPH E 6531 NW 109TH PLACE ALACHUA, FL 32615</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRECK, JOSEPH P.O. BOX 357688 GAINESVILLE, FL 326357688
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAPLAN, ANDREW 1219 N.W. 35TH AVENUE GAINESVILLE, FL 32609
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04/27/07-80046-018 50.00

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:** *Joseph E. Freck* **Joseph E. Freck** **Managing Member** **4/16/07** **(352) 284-1537**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #