

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008 08:00 A
Secretary of State

DOCUMENT # L04000079717

1. Entity Name
THE LAKE AT TURKEY CREEK DEVELOPMENT, LLC



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



04072008No Chg-LLC CR2E083 (12/07)

4. FEI Number 75-3197939	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**FRECK, JOSEPH E
 6531 NW 109TH PLACE
 ALACHUA, FL 32615**

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 _____

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

000000829492
 04/22/08-80056-011 138.75

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Joseph E. Freck* **Joseph E. Freck** 4/7/2008 (352) 225-4626

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