## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L04000082243

1. Entity Name

TOWNCENTER CROSSINGS LLC



Principal Place of Business

1590 ISLAND LANE

SUITE 28

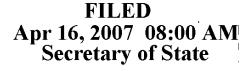
ORANGE PARK, FL 32003

Mailing Address

1590 ISLAND LANE

SUITE 28

ORANGE PARK, FL 32003





03162007 No Chg-LLC

CR2E083 (11/05)

Fee Regulred

4. FEI Number 20-1959637	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

O'CONNOR, JOHN W 1590 ISLAND LANE SUITE 28 ORANGE PARK, FL 32003

DO NOT WRITE IN THIS SPACE

<ol><li>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 acc the obligations of registered agent.</li></ol>		
Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007		000000709253 04/24/07-80147-002 50.00
MANAGING MEMBERS/MANAGERS	······································	

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGMR O'CONNOR, JOHN W 1590 ISLAND LANE, SUITE 28 ORANGE PARK, FL 32003
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes ! 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.