

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-27-2008 90087 030 ***138.75

DOCUMENT # L05000040799

1. Entity Name
CREEK PARK, LLC



Principal Place of Business
1086 LONGWOOD DRIVE
WOODSTOCK, GA 30189

Mailing Address
1086 LONGWOOD DRIVE
WOODSTOCK, GA 30189

60017571



DO NOT WRITE IN THIS SPACE

02272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-2703112

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANKLIN H. WATSON, P.A.
5365 E. COUNTY HIGHWAY 30A, STE. 105
SEAGROVE BEACH, FL 32459

**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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRP
NAME	FLAIG, JONATHAN J
STREET ADDRESS	1086 LONGWOOD DR
CITY-ST-ZIP	WOODSTOCK, GA 30189
TITLE	MGRP
NAME	ONEAL, ALAN
STREET ADDRESS	101-A BUSINESS CENTRE DR
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	MGRP
NAME	LAWSON, JULIE L
STREET ADDRESS	4039 E. CO. HWY 30-A
CITY-ST-ZIP	SEAGROVE BEACH, FL 32459
TITLE	MGRP
NAME	SMITH, WILLIAM H
STREET ADDRESS	42 BUSINESS CENTRE DR, SUITE 106
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	MGRP
NAME	WILLIAMS, JAMES
STREET ADDRESS	1300 GRAYSON PARKWAY
CITY-ST-ZIP	GRAYSON, GA 30017
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. 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/14/08

Date

Daytime Phone #