## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

## **DOCUMENT # L05000082445**

1. Entity Name

STANTON CREEK LLC



FILED Apr 18, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

3522 SADDLEBACK LANE LUTZ, FL 33548 US 3522 SADDLEBACK LANE LUTZ, FL 33548 US



04142007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 42-1679237 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STANTON, DIANA - MRS. 3522 SADDLEBACK LANE LUTZ, FL 33548

SIGNATURE:

## 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	O) DATE
Filing Fee Is \$50.00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		•••
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STANTON CREEK LLC 3522 SADDLEBACK LN LUTZ, FL 33548		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	O NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	I THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP			000000715005 04/27/07-80046-004 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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.			