

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083811

FILED
Apr 29, 2008
Secretary of State

Entity Name: ROCKY CREEK ESTATES, LLC

Current Principal Place of Business:

500 N. WESTSHORE BOULEVARD
SUITE 525
TAMPA, FL 33609 US

New Principal Place of Business:

101 SOUTH HOOVER BOULEVARD
STE. 103
TAMPA, FL 33609 US

Current Mailing Address:

500 N. WESTSHORE BOULEVARD
SUITE 525
TAMPA, FL 33609 US

New Mailing Address:

101 SOUTH HOOVER BOULEVARD
STE. 103
TAMPA, FL 33609 US

FEI Number: 04-3824510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, STEPHEN M
500 N. WESTSHORE BOULEVARD
SUITE 525
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

MILLER, STEPHEN M
101 SOUTH HOOVER BOULEVARD
STE. 103
TAMPA, FL 33609 US

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.

SIGNATURE: STEPHEN MILLER

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FRANKS, LAWRENCE C
Address: 5011 W HILLSBOROUGH AVE STE N
City-St-Zip: TAMPA, FL 33634

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: MILLER, STEPHEN M
Address: 101 SOUTH HOOVER BLVD., #103
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN MILLER

MGR

04/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date