

FILED
Apr 28, 2008 08:00 AM
Secretary of State

**2008 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L05000105127
 1. Entity Name
 STILLWATER 10 HOLDINGS, LLC



Principal Place of Business Mailing Address
 256 NORTH KENTUCKY AVE-NUF 256 NORTH KENTUCKY AVE-NUF
 LAKELAND, FL 33801 US LAKELAND, FL 33801 US



04232038 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3687327 Applicable? YES/No
 5. Certificate of Good Standing \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 AIRTH, HAL A JR
 500 SOUTH FLORIDA AVENUE
 SUITE 800
 LAKE LAND, FL 33801

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8. The above information is being submitted to the Secretary of State for the purpose of filing and is not intended to be used for any other purpose. The filer warrants that the information is true and correct to the best of their knowledge and belief.

DECLARATION: I, _____, declare that the above information is true and correct to the best of my knowledge and belief.

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

9. MANAGING MEMBERS/MANAGERS

TYPE	P
NAME	MCDONALD RICHARD I
STREET ADDRESS	1023 DEESON WOODS LANE
CITY-STATE-CP	LAKELAND, FL 33805
TYPE	V
NAME	MCDONALD SHAWN
STREET ADDRESS	2122 INDIAN SKY CIRCLE
CITY-STATE-CP	LAKELAND FL 33813
TYPE	V
NAME	KIMSEY, KEITH
STREET ADDRESS	616 VICTORIA SQUARE LANE
CITY-STATE-CP	LAKELAND FL 33813
TYPE	S
NAME	BAIDEN, GREG D
STREET ADDRESS	4510 RUSHING ROAD
CITY-STATE-CP	LAKELAND, FL 33810
TYPE	
NAME	
STREET ADDRESS	
CITY-STATE-CP	

U00000924677
 05/19/08-80011-003 138.75

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 IN THIS SPACE**

11. I hereby certify that the information supplied with this filing is true and correct to the best of my knowledge and belief. I understand that the information provided on this report is true and available and that any person who provides false information shall have the same legal consequences as if they had made the same information available to the public. I understand that the information provided on this report is true and available and that any person who provides false information shall have the same legal consequences as if they had made the same information available to the public. I understand that the information provided on this report is true and available and that any person who provides false information shall have the same legal consequences as if they had made the same information available to the public.

SIGNATURE: _____
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE