## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001531

**Current Principal Place of Business:** 

Entity Name: SWIMMING PEN CREEK, LLC

FILED Mar 25, 2009 Secretary of State

14 SWIMMING PEN DRIVE MIDDLEBURG, FL 32068 **Current Mailing Address: New Mailing Address:** 14 SWIMMING PEN DRIVE MIDDLEBURG, FL 32068 FEI Number: 59-3829257 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOLSON, JOHN F JR 462 KINGSLEY AVENUE, SUITE 101 ORANGE PARK, FL 32073 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: Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

() Change () Addition

**New Principal Place of Business:** 

## MANAGING MEMBERS/MANAGERS:

ele: MGRM ( ) Delete Title:

 Name:
 TURMAN, CORAL A
 Name:

 Address:
 14 SWIMMING PEN DRIVE
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

Title: MGRM ( ) Delete Title: MGR (X) Change ( ) Addition Name: COVERT, STEVEN J Name: TURMAN, JASON C

Address: 14 SWIMMING PEN DRIVE Address: 14 SWIMMING PEN DRIVE
City-St-Zip: MIDDLEBURG, FL 32068 City-St-Zip: MIDDLEBURG, FL 32068

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 TURMAN, JASON C
 Name:

 Address:
 14 SWIMMING PEN DRIVE
 Address:

 City-St-Zip:
 MIDDLEBURG, FL 32068
 City-St-Zip:

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: JASON C TURMAN MGR 03/25/2009