

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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|--|---------------------------------|---|--|
| DOCUMENT # L06000037432 1. Entity Name CREEKSIDE OFFICE PARK, LLC | | FILED 07 MAY 25 PM 1:11 SECRETARY OF STATE TALLAHASSEE, FLORIDA | |
| Principal Place of Business 4501 BEVERLY AVENUE JACKSONVILLE, FL 32210 | | Mailing Address 4501 BEVERLY AVENUE JACKSONVILLE, FL 32210 | |
| 2. Principal Place of Business - No P.O. Box # 5851 TIMUGUANA Rd Suite, Apt. #, etc. 301 | | 3. Mailing Address 5851 TIMUGUANA Rd Suite, Apt. #, etc. 301 | |
| City & State JACKSONVILLE FL | | City & State JACKSONVILLE FL | |
| Zip 32210 | | Country OWYAL | |
| 4. FEI Number 204916519 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$5.00 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent ATLEE, KENYON S 4501 BEVERLY AVENUE JACKSONVILLE, FL 32210 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 5851 TIMUGUANA Rd Ste 301 D City JACKSONVILLE FL Zip Code 32210 | |
| 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | Make check payable to Florida Department of State | |
| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
| TITLE MGR NAME KENDALE LAND DEVELOPMENT, INC. STREET ADDRESS 5851 TIMUGUANA Rd, Ste 301 CITY-ST-ZIP JACKSONVILLE, FL 32210 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 000103907550 06/05/07--01015--014 **\$50.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 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: <u>Ken S. Atlee</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> | | Kenyon S. Atlee 4-23-07 904-384-6964 <small>Date Daytime Phone #</small> | |

| <u>Entity Name</u> | <u>Document #</u> | <u>Fee Amount</u> |
|--------------------------------|---------------------------|-------------------|
| ATLEE LAND GROUP, INC. | P05000166661 | 150.00 |
| CREEKSIDE OFFICE PARK, LLC | L06000037432 | 50.00 |
| KENDALE LAND DEVELOPMENT, INC. | P01000120554 | 150.00 |
| RIVERBEND LAND COMPANY | P06000086360 | 150.00 |
| OAKS AT OLD KINGS, LLC | L06000083190 | 50.00 |
| Total | Check # <u>203</u> | <u>550.00</u> |