2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052675

Entity Name: CREEKSTONE LINKS, LLC

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

115 PROFESSIONAL DRIVE 475 W TOWN PLACE

SUITE 101 SUITE 200

PONTE VEDRA BEACH, FL 32082 ST. AUGUSTINE, FL 32092

New Mailing Address: Current Mailing Address:

475 W TOWN PLACE SUITE 200 115 PROFESSIONAL DRIVE

SUITE 101

PONTE VEDRA BEACH, FL 32082 ST.AUGUSTINE, FL 32092

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HATHAWAY, RICHARD G MURPHY, PATRICK T 475 W TÓWN PLACE 115 PROFESSIONAL DRIVE

SUITE 101 SUITE 200

PONTE VEDRA BEACH, FL 32082 US ST. AUGUSTINE, FL 32092 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: PATRICK T MURPHY 04/26/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

ORLANDO, FRANK P Name: Name: ONE SOUTH CHURCH STREET Address: Address: City-St-Zip: HAZLETON, PA 18201 City-St-Zip:

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

MURPHY, PATRICK T Name: MURPHY, PATRICK T Name:

Address: P.O. BOX 4278, 475 WEST TOWN PLACE, #200 Address: 475 WEST TOWN PLACE, #200 City-St-Zip: ST. AUGUSTINE, FL 32085 City-St-Zip: ST. AUGUSTINE, FL 32092

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

MURPHY, MICHAEL A MURPHY, MICHAEL A Name: Name: Address: 115 PROFESSIONAL DRIVE, SUITE 101 475 WEST TOWN PLACE, #200 Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGR () Delete Title: MGR (X) Change () Addition Name: LABAR, JAMES C Name: LABAR, JAMES C

115 PROFESSIONAL DRIVE, SUITE 101 475 WEST TOWN PLACE, #200 Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: ST. AUGUSTINE, FL 32092

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: PATRICK T MURPHY **MGRM** 04/26/2007