

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056126

FILED  
Feb 23, 2007  
Secretary of State

Entity Name: CORAL CREEK LLC

**Current Principal Place of Business:**

815 PEACOCK PLAZA  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

815 PEACOCK PLAZA  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 20-4997218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: OROPEZA, SCOTT  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: RODRIGUEZ, MIKE  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: OROPEZA, TODD  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: BUCKHEIM, RICHARD  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: PARKS, JOHN  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Delete  
Name: HUTTON, WOODY  
Address: 815 PEACOCK PLAZA  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SCOTT OROPEZA

MGRM

02/23/2007

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