


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
08 FEB 11 PM 3:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L06000056133					
1. Entity Name <b>STONE CREEK HEIGHTS, LLC</b>					
Principal Place of Business <b>2651 NELSON COURT WESTON, FL 33332</b>			Mailing Address <b>2651 NELSON COURT WESTON, FL 33332</b>		
<b>2651 NELSON COURT</b>			<b>2651 NELSON COURT</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>2651 NELSON COURT</b>			
Suite, Apt. #, etc. <b>2651 NELSON COURT</b>		Suite, Apt. #, etc. <b>WESTON, FL</b>			
City & State <b>WESTON, FL</b>		City & State			
Zip <b>33332</b>		Country <b>USA</b>		Zip <b>33332</b>	
				Country <b>USA</b>	
6. Name and Address of Current Registered Agent <b>CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			Zip Code		
			<b>FL</b>		
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 _____ DATE _____					
Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating)					
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHEEZEM, CHARLES K MR. 2651 NELSON COURT WESTON, FL 33332	<input type="checkbox"/> Delete <div style="float: right;"> <input type="checkbox"/> Change   <input type="checkbox"/> Addition         </div>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<div style="text-align: center;"> <b>700118149967</b>  <b>02/15/08--01039--012   **138.75</b> </div>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete <div style="float: right;"> <input type="checkbox"/> Change   <input type="checkbox"/> Addition         </div>			
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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: <b>Charles K. Cheezem</b>				Date: <b>2-08-2008</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					