

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000059493 1. Entity Name POND CREEK 50, LLC	
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Principal Place of Business 6 HIGHPOINT DRIVE GULF BREEZE, FL 32561	Mailing Address 6 HIGHPOINT DRIVE GULF BREEZE, FL 32561
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DO NOT WRITE IN THIS SPACE



04162008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 30-5280894	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent MATTHEWS, EDSSEL F JR. 308 SOUTH JEFFERSON STREET PENSACOLA, FL 32502
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

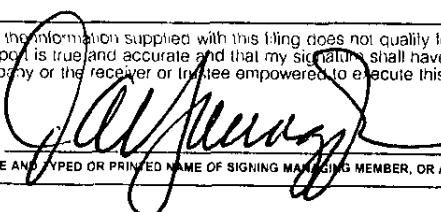
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BELL, ALLAN 6 HIGHPOINT DRIVE GULF BREEZE, FL 32561
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YOUNG, JAMES A JR. 5049 BASIN AVENUE MILTON, FL 32570
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000935366
05/23/08-80099-002 138.75

**DO NOT WRITE
IN THIS SPACE**

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:  DATE: 4-28-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DAYTIME PHONE #