2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L06000075275

Entity Name: TFG CREEKWOOD, LLC

Current Principal Place of Business:

6111 BROKEN SOUND PARKWAY NW
STE 150
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

6111 BROKEN SOUND PARKWAY NW
STE 150
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-5288132 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 322023520 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:	MM	( ) Delete
Name:	FINCH, WESLEY E	
Address:	6111 BROKEN SOUND PARKWAY NW	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	T	( ) Delete
Name:	BLACKINTON, DENNIS H	
Address:	6111 BROKEN SOUND PARKWAY NW	
City-St-Zip:	BOCA RATON, FL 33487	
Title:	S	( ) Delete
Name:	JAMES, ROBERT A	
Address:	6111 BROKEN SOUND PARKWAY NW	
City-St-Zip:	BOCA RATON, FL 33487	

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:	

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: DENNIS H. BLACKINTON T 03/19/2009

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