2008 LIMITED LIABILITY COMPANY ANNUAŁ REPORT

DOCUMENT # L06000091126

1. Entity Name

DAYTONA ISLAND CREEK INVESTMENTS, LLC



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

CR2E083 (12/07)

Principal Place of Business

979 BEACHLAND BLVD. VERO BEACH, FL 32963 Mailing Address

979 BEACHLAND BLVD. VERO BEACH, FL 32963



DO NOT WRITE IN THIS SPACE

04162008 No Chg-LLC

4. FEI Number Applied For

20-5565294 Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

FENNELL, TODD W 979 BEACHLAND BLVD. VERO BEACH, FL 32963

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8.	i. 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 a	am familiar with, and accept
	the obligations of registered agent.	•

SIGNATURE _______Signature, typed or printed name of

Signature, typed or printed name of registered agent and life if applicable

(NOTE, Registered Agent signature required when reinstalling)

DATE

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

9. MANAGING MEMBERS/MANAGERS	
TOTLE NAME STREET ADDRESS CITY-ST-ZIP	P GOSSWEILER, JACQUES A 979 BEACHLAND BLVD VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CHY-ST-ZIP	VPS FENNELL, TODD 979 BEACHLAND BLVD VERO BEACH, FL 32963
NAME STREET ADDRESS CITY-ST-ZIP	VPT BAUMAN, MARC 979 BEACHLAND BLVD VERO 8EACH, FL 32963
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U00000936553 U5/27/08-80015-007 138.75

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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: () are w Jenn

4-28-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #