

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108982

FILED
May 04, 2009
Secretary of State

Entity Name: HIDDEN CREEK STABLES, LLC

Current Principal Place of Business:

426 SMITH ROAD
FREEPORT, FL 32439 US

New Principal Place of Business:

Current Mailing Address:

22 LODGE ROAD
FREEPORT, FL 32439 US

New Mailing Address:

428 SMITH ROAD
FREEPORT, FL 32439 US

FEI Number: 20-5856011 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MILLS, JAMES R
22 LODGE ROAD
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

MILLS, JAMES R
428 SMITH ROAD
FREEPORT, FL 32439 US

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:

05/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILLS, JAMES R
Address: 22 LODGE ROAD
City-St-Zip: FREEPORT, FL 32439 US

Title: MGRM () Delete
Name: MILLS, DENISE
Address: 22 LODGE ROAD
City-St-Zip: FREEPORT, FL 32439 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MILLS, JAMES R
Address: 428 SMITH ROAD
City-St-Zip: FREEPORT, FL 32439 US

Title: MGRM (X) Change () Addition
Name: MILLS, DENISE
Address: 428 SMITH ROAD
City-St-Zip: FREEPORT, FL 32439 US

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: DENISE MILLS

MGRM

05/04/2009

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