

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111105

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: WILLOW CREEK CENTER, LLC

## Current Principal Place of Business:

3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934

## New Principal Place of Business:

## Current Mailing Address:

3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934

## New Mailing Address:

P.O. BOX 410686  
MELBOURNE, FL 32941

FEI Number: 14-1982347

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOLOGNA-GARAGOZLO, PATRICIA  
3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 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: MGRM ( ) Delete  
Name: BP OF BREVARD, LLC,  
Address: P.O. BOX 410686  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM ( ) Delete  
Name: RRLS LLC,  
Address: 28 MARSHALL AVENUE  
City-St-Zip: FLORAL PARK, NY 11001

Title: MGRM ( ) Delete  
Name: RTLD LLC,  
Address: 11 NANCY ROAD  
City-St-Zip: NANUET, NY 10954

Title: MGRM ( ) Delete  
Name: AJ WILLOW LLC,  
Address: 111 N. POMPANO BEACH BLVD., APT. 1403  
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM ( ) Delete  
Name: DS GRISSOM LLC,  
Address: 4524 PGA BLVD., PMB 121  
City-St-Zip: PALM BEACH GARDENS, FL 33418

## 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:

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: PAT GARAGOZLO

MGR

01/05/2009

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