2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 29, 2008
Secretary of State

DOCUMENT# L07000058435

Entity Name: CREEKSIDE BASKETS, LLC

Current Principal Place of Business:

4414 N.W. 52ND STREET
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

4414 N.W. 52ND STREET
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 26-0296018 **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:

STOKES, MICHAEL
4414 N.W. 52ND STREET
COCONUT CREEK, FL 33073 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: MGR ( ) Delete
Name: STOKES, MICHAEL
Address: 4414 N.W. 52ND STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM ( ) Delete
Name: STOKES, AMY
Address: 4414 N.W. 52ND STREET
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: STOKES, AMY
Address: 4414 N.W. 52ND STREET
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM (X) Change ( ) Addition
Name: STOKES, MICHAEL
Address: 4414 N.W. 52ND STREET
City-St-Zip: COCONUT CREEK, FL 33073

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: AMY STOKES MGR 08/29/2008

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