

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2008 8:00 am**  
**Secretary of State**

04-16-2008 90111 015 \*\*\*138.75

**DOCUMENT # L07000076520**

1. Entity Name  
**SPRUCE CREEK RECREATION, LLC**



Principal Place of Business  
**2605 SW 33RD STREET, BLDG. 200  
C/O HERITAGE MGMT. CORP.  
OCALA, FL 34471**

Mailing Address  
**2605 SW 33RD STREET, BLDG. 200  
C/O HERITAGE MGMT. CORP.  
OCALA, FL 34471**

**50003436**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03202008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KIRKPATRICK, KENNETH B  
2605 SW 33RD STREET, BLDG. 200  
C/O HERITAGE MGMT. CORP.  
OCALA, FL 34471**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME KIRKPATRICK, KENNETH B  
STREET ADDRESS 2605 SW 33RD STREET, BLDG. 200  
CITY-ST-ZIP Ocala, FL 34471

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *X*

**Kenneth Kirkpatrick 3/24/08 352/482-0777**

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

Date

Daytime Phone #



**HERITAGE**  
Management Corp.

ATTACHMENT

50003436

Licensed Real Estate Broker

April 15, 2008

Florida Department of State  
Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

Re: Spruce Creek Recreation -- L07000076520

To Whom It May Concern:

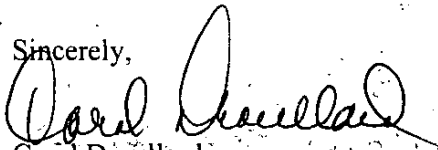
On March 31, 2008 we issued our check #471 to cover the filing fee for the 2008 Limited Liability Annual Report for the above company. We erroneously sent the check without the annual report.

After talking with personnel in your office, we were advised to file the Annual Report with another check since locating the original check at this time would not be possible.

Therefore, enclosed are the 2008 Annual Report and Check #497 for the filing fee. If you are able to locate the original check, please return it to us at P.O. Box 2495, Ocala, FL 34478.

We apologize for this inconvenience.

Sincerely,



Carol Drouillard

CD:s

