

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000007435

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** CRESTVIEW MEADOWS, LLC

**Current Principal Place of Business:**

631 S. ORLANDO AVENUE, SUITE 400  
WINTER PARK, FL 32789

**New Principal Place of Business:**

631 S. ORLANDO AVENUE  
SUITE 400  
WINTER PARK, FL 32789

**Current Mailing Address:**

631 S. ORLANDO AVENUE, SUITE 400  
WINTER PARK, FL 32789

**New Mailing Address:**

631 S. ORLANDO AVENUE  
SUITE 400  
WINTER PARK, FL 32789

**FEI Number:** 26-1768309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BALLIETT, DEE  
631 S. ORLANDO AVENUE, SUITE 400  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

BALLIETT, DEE  
631 S. ORLANDO AVENUE  
SUITE 400  
WINTER PARK, FL 32789 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: \_\_\_\_\_

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BALLIETT, DOLORES  
Address: 631 S. ORLANDO AVENUE, SUITE 400  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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: DOLORES BALLIETT

MGRM

04/30/2010

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