2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L9400000718 1. Entity Name BULOW CREEK, L.C. Principal Place of Business 3348 EDGEWATER DR ORLANDO, FL 32804 Mailing Address Address ORLANDO, FL 32804	Secretary of State
DO NOT WRITE IN THIS SPA	02182004 No Chg-LLC
WILLIAMS, WARREN E 28 W CENTRAL BLVD ORLANDO, FL 32801	DO NOT WRITE IN THIS SPACE
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) QATE	
Filing Fee Is \$50.00 Due by May 1, 2004	03/12/04-80043-012 50.00
9. MANAGING MEMBERS/MANAGERS TITLE MGRM CHIRA, LEE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32801 TITLE MGRM NAME DEMETREE, MARY STREET ADDRESS 3348 EDGEWATER DR CITY-ST-ZIP ORLANDO, FL 32804	
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NAME STREET ADDRESS CITY-ST-ZIP 11. Thereby certify that the information supplied with this filling does not qualify for the experience.	xemplion stated in Section 119.07(3)(i). Florida Statutes further certify that the information
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Dayling Phone 9	