

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000001660

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** SPRING CREEK-MELBOURNE, L.C.

**Current Principal Place of Business:**

1020 W EAU GALLIE BLVD  
STE I  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

1020 W EAU GALLIE BLVD  
STE I  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-3565337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUST, DONALD  
1020 W. EAU GALLIE BLVD.  
MELBOURNE, FL 32935 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  
**Name:** GUST, DONALD E  
**Address:** 2701 GOLFVIEW DR.  
**City-St-Zip:** MELBOURNE, FL 32901

**Title:** MGR  
**Name:** SMITH, WILLIAM C  
**Address:** 2850 PINEAPPLE AVE  
**City-St-Zip:** MELBOURNE, FL 32935

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:** DONALE E GUST

MGR

04/19/2011

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