

FILED

2003 JUN 20 AM 8:37

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

700021032687  
06/20/03--01042--001 \*\*50.00

**2003 LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # L99000005531**

1. Entity Name  
**CREEKSIDE OAKS, L.L.C.**

Principal Place of Business  
870 HIGGINS RD.  
#136  
SCHAUMBURG, IL 60173

Mailing Address  
870 HIGGINS RD.  
#136  
SCHAUMBURG, IL 60173

2. Principal Place of Business  
**40 G.V.W. 600 CENTRAL**  
Suite, Apt. #, etc.  
**# 214**  
City & State  
**HIGHLAND PARK, IL**  
Zip  
**60035** Country  
**USA**

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number  
**38-4314470** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**ALLARD, WILLIAM**  
**695 CENTRAL AVE., SUITE 207**  
**ST. PETERSBURG, FL 33701**

7. Name and Address of New Registered Agent  
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: *David Feltman* **DAVID FELTMAN, MGR** **6/17/03**

9. MANAGING MEMBERS / MANAGERS

MANAGING MEMBERS / MANAGERS		ADDITIONS/CHANGES	
TITLE	DELETE <input checked="" type="checkbox"/>	TITLE	CHANGE <input type="checkbox"/> ADDITION <input checked="" type="checkbox"/>
<b>MGR</b> <b>FELTMAN, DAVID</b> <b>870 HIGGINS RD., SUITE 136</b> <b>SCHAUMBURG, IL 60173</b>	<input checked="" type="checkbox"/>	<b>MGR</b> <b>DAVID FELTMAN, G.V.W.</b> <b>600 CENTRAL AVE</b> <b>HIGHLAND PARK, IL 60035</b>	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), 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 prepare this report as required by Chapter 906, Florida Statutes.

SIGNATURE: *David Feltman* **DAVID FELTMAN, MGR** **6/17/03** **847780204**



CHECK HERE IF MAKING CHANGES

CP-REDB33 (1/01/02)