No. <b>W 10149</b>	Due no later than Nov 30, 2010		2. Registered Agent and Address (NO PO BOX)			
Return to:	Annual Report Form		STEPHEN E MARTIN			
SECRETARY OF STATE	1. Mailing Address: Correct in this box if needed.  THREE CREEKS, LLC  STEPHEN E MARTIN PO BOX 3189		425 S HOLMES AVE IDAHO FALLS ID 83401			
700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080						
	IDAHO FALLS ID 83403-3189		3. <u>New</u> Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE						
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code
MANAGER R. CHRISTOPHER OTT		3940 PROSPECT AVENUE, SUITE 10	NAPLES	FL	USA	34104
5. Organized Under the Laws of:  6. Annual Report must be signed.*						
Signature: Stephen E. Martin		E. Martin	Date: 10/09/2010			
W 10149	Name (type or print): Stephen E. Martin		Title: Attorney			
Processed 10/09/2010	* Electronically provided signatures are accepted as original signatures.					