

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000426

Entity Name: PRESTON YOGA 1, LLC

FILED  
Apr 24, 2008  
Secretary of State

**Current Principal Place of Business:**

ONE NORTH CLEMATIS STREET  
#305  
WEST PALM BEACH, FL 33401 US

**Current Mailing Address:**

ONE NORTH CLEMATIS STREET  
#305  
WEST PALM BEACH, FL 33401 US

FEI Number: 20-8538696

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**New Principal Place of Business:**

4650 DONALD ROSS ROAD  
SUITE 200  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

4650 DONALD ROSS ROAD  
SUITE 200  
PALM BEACH GARDENS, FL 33418 US

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

ALVAREZ & MARSAL TAXAND, LLC  
TWO ALHAMBRA PLAZA  
SUITE 1101  
CORAL GABLES, FL 33134 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: MGRM ( ) Delete  
Name: PRESTON, NICOLE C  
Address: ONE NORTH CLEMATIS STREET #305  
City-St-Zip: WEST PALM BEACH, FL 33401 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PRESTON, NICOLE C  
Address: 4650 DONALD ROSS ROAD STE 200  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: NICOLE C PRESTON

MGRM

04/24/2008

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