

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000052954

**Entity Name:** 865 EAST 49TH STREET ASSOCIATES, LLC

**Current Principal Place of Business:**

555 COLDSTREAM COURT NW  
ATLANTA, GA 30328

**Current Mailing Address:**

555 COLDSTREAM COURT NW  
ATLANTA, GA 30328

**FEI Number:** 20-3547377

**Certificate of Status Desired:** No

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

ROSEN, SCOTT  
150 S. PINE ISLAND ROAD  
417  
PLANTATION, FL 33324 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name STANWICK, JULIE  
Address 550 COLDSTREAM COURT NW  
City-State-Zip: ATLANTA GA 30328

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JULIE STANWICK

MGRM

01/31/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date