

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844600

FILED
Apr 15, 2008
Secretary of State

Entity Name: 1515 MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

17556 LAKE ESTATES DR.
BOCA RATON, FL 33496 US

New Principal Place of Business:

Current Mailing Address:

17556 LAKE ESTATES DRIVE
BOCA RATON, FL 33496 US

New Mailing Address:

17556 LAKE ESTATES DR.
BOCA RATON, FL 33496 US

FEI Number: 42-0991438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRODY, ELLIOT
17556 LAKE ESTATES DR
BOCA RATON, FL 33496 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BRODY, ELLIOT J.
Address: 17556 LAKE ESTATES DR.
City-St-Zip: BOCA RATON, FL 33496

Title: V () Delete
Name: BRODY, BRADLEY M.
Address: 13901 SOUTH SHORE DR
City-St-Zip: CLIVE, IA 50325

Title: V () Delete
Name: BRODY, JEFFREY
Address: 21654 MARIGOT DRIVE
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: BRODY, HELENE A
Address: 17556 LAKE ESTATES DRIVE
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: GOLIEB, ARNOLD
Address: 17591 FOXBOROUGH LANE
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY BRODY

V

04/15/2008

Electronic Signature of Signing Officer or Director

Date