2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000008114

1. Entity Name 15 NORTH EOLA, LLC



FILED Feb 25, 2008 08:00 A Secretary of State

Principal Place of Business

20 NORTH EOLA DRIVE ORLANDO, FL 32801

Mailing Address

20 NORTH EOLA DRIVE ORLANDO, FL 32801



DO NOT WRITE IN THIS SPACE

01292008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 03-0426307

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARDING, ROBERT L ESQ. 20 NORTH EOLA DRIVE ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000840244 03/06/08-80040-023 138.75

۱	9	MANAGING MEMBERS/MANAGERS	ı
I	TITLE	MGR	ľ
I	NAME	HARDING, ROBERT L	-
I	STREET ADDRESS	20 NORTH EOLA DRIVE	
ļ	CITY-ST-ZIP	ORLANDO, FL 32801	l
	TITLE	MGR	ĺ.
ı	NAME	RAILEY, LILBURN R III	
I	STREET ADDRESS	20 NORTH EOLA DRIVE	l
I	CITY-SI-ZIP	ORLANDO, FL 32801	4
	TITLE		
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l	11. I hereby	certify that the information supplied with this filling does not qualify for the exe	en

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/20/08

407.648.9119

Daytime Phone #