

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025502

Entity Name: PEGASUS 115, LLC

FILED  
May 01, 2007  
Secretary of State

**Current Principal Place of Business:**

1900 W COMMERCIAL BLVD  
STE 180  
FT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

1900 W COMMERCIAL BLVD  
STE 180, ATTN: ACCOUNTING  
FT LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 46-0500402      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WALDMAN, JAMES  
1900 W COMMERCIAL BLVD, STE 180  
FT LAUDERDALE, FL 33309      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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PEGASUS AIRBORNE PAR, TNER, LLC  
Address: 1900 W COMMERCIAL BLVD, STE 180  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: MGRM ( ) Delete  
Name: 115 PARTNER, LLC,  
Address: 200 S BISCAYNE BLVD STE 3800  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

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 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: ARTHUR KEISER

MGRM

05/01/2007

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