


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 29, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000031229 1. Entity Name ALLIANT TARA HILLS, LLC	
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Principal Place of Business 340 ROYAL POINCIANA WAY, SUITE 305 PALM BEACH, FL 33480	Mailing Address 340 ROYAL POINCIANA WAY, SUITE 305 PALM BEACH, FL 33480
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03242008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2415872	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HAMLIN, CURTIS D 1205 MANATEE AVENUE W. BRADENTON, FL 34205

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____</small>

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

11000000931947
05/22/08 00000 001 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HORWITZ, SHAWN 21550 OXNARD STREET, SUITE 1020 WOODLAND HILLS, CA 91367
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DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
Date _____ Daytime Phone # _____