

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013891

Entity Name: PRESERVE 15 LLC

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

5821 MEDINAH WAY
ORLANDO, FL 32819 US

New Principal Place of Business:

8810 COMMODITY CIRCLE
STE 33
ORLANDO, FL 32819 US

Current Mailing Address:

5821 MEDINAH WAY
ORLANDO, FL 32819 US

New Mailing Address:

8810 COMMODITY CIRCLE
STE 33
ORLANDO, FL 32819 US

FEI Number: 20-8723565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAAS, MICHAEL
5821 MEDINAH WAY
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

HAAS, MICHAEL
8810 COMMODITY CIRCLE
STE 33
ORLANDO, FL 32819 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: MICHAEL HAAS

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HAAS, MICHAEL
Address: 2031 SAILBOROUGH COURT
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGRM () Delete
Name: MARIANO, ROBERT SR.
Address: 5821 MEDINAH WAY
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HAAS, MICHAEL
Address: 8810 COMMODITY CIRCLE, STE 33
City-St-Zip: ORLANDO, FL 32819 US

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: MICHAEL HAAS

MGRM

01/20/2009

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