

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117682

**FILED**  
**Feb 19, 2009**  
**Secretary of State**

**Entity Name:** ALLIANT TAX CREDIT I, LLC

**Current Principal Place of Business:**

340 ROYAL POINCIANA WAY STE 305  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

340 ROYAL POINCIANA WAY STE 305  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 65-0783644

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAMLIN, CURTIS D ESQ  
PORGES, HAMLIN, KNOWLES, PROUTY, THOMPSON  
1205 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: HOROWITZ, SHAUN  
Address: 340 ROYAL POINCIANA WAY STE 305  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES:**

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:** SHAWN HORWITZ

PRES

02/19/2009

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