

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018439

Entity Name: 715 N. MACEWEN, LLC

FILED
Jan 20, 2009
Secretary of State

Current Principal Place of Business:

715 N. MACEWEN DRIVE
OSPREY, FL 34229 US

New Principal Place of Business:

Current Mailing Address:

715 N. MACEWEN DRIVE
OSPREY, FL 34229 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERSSE, JOHN W
1800 SECOND STREET
757
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

PERSSE, JOHN W
1800 SECOND STREET
819
SARASOTA, FL 34236 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:

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THALMANN, WILLIAM H
Address: 715 N. MACEWEN DRIVE
City-St-Zip: OSPREY, FL 34229 US

Title: MGRM () Delete
Name: ROY-THALMANN, DEBORAH A
Address: 715 N. MACEWEN DRIVE
City-St-Zip: OSPREY, FL 34229 US

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: DEBORAH ANN ROY-THALMANN

MANG

01/20/2009

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