

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033450

**FILED**  
**Feb 13, 2009**  
**Secretary of State**

**Entity Name:** CARTER ENTERPRISES XV, LLC

**Current Principal Place of Business:**

7967 COUNTY HIGHWAY 280 E.  
DEFUNIAK SPRINGS, FL 32435

**New Principal Place of Business:**

**Current Mailing Address:**

7967 COUNTY HIGHWAY 280 E.  
DEFUNIAK SPRINGS, FL 32435

**New Mailing Address:**

7967 COUNTY HIGHWAY 280 EAST  
DE FUNIAK SPRINGS, FL 32435

**FEI Number:** 26-2356201

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARTER, PEGGY F  
7967 COUNTY HIGHWAY 280 E.  
DEFUNIAK SPRINGS, FL 32435 US

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

CARTER, PEGGY F  
7967 COUNTY HIGHWAY 280 EAST  
DE FUNIAK SPRINGS, FL 32435-890 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:** PEGGY F. CARTER

02/13/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MM ( ) Change (X) Addition  
Name: CARTER, PEGGY F  
Address: 7967 COUNTY HIGHWAY 280 E  
City-St-Zip: DE FUNIAK SPRINGS, FL 32435

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:** PEGGY F CARTER

MM

02/13/2009

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