

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116652

**FILED**  
**Apr 17, 2009**  
**Secretary of State**

**Entity Name:** ALLIANT TAX CREDIT 49, LLC

**Current Principal Place of Business:**

340 ROYAL POINCIANA WAY SUITE 305  
PALM BEACH, FL 33480

**New Principal Place of Business:**

340 ROYAL POINCIANA WAY, SUITE 305  
PALM BEACH, FL 33480

**Current Mailing Address:**

340 ROYAL POINCIANA WAY SUITE 305  
PALM BEACH, FL 33480

**New Mailing Address:**

340 ROYAL POINCIANA WAY, SUITE 305  
PALM BEACH, FL 33480

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

HAMLIN, CURTIS D ESQ  
1205 MANATEE AVE. WEST  
BRADENTON, FL 34205 US

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

HAMLIN, CURTIS D ESQ  
1205 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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: \_\_\_\_\_ 04/17/2009  
Electronic Signature of Registered Agent                      Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title:                      PRES                      ( ) Change (X) Addition  
Name:                      HORWITZ, SHAWN  
Address:                      340 ROYAL POINCIANA WAY, SUITE 305  
City-St-Zip:                      PALM BEACH, FL 33480

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                      04/17/2009  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date