

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000048821

Entity Name: MP 1515, LLC

**FILED**  
**Feb 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2500 NORTHWINDS PARKWAY  
275  
ALPHARETTA, GA 30009 US

**New Principal Place of Business:**

**Current Mailing Address:**

2500 NORTHWINDS PARKWAY  
275  
ALPHARETTA, GA 30009 US

**New Mailing Address:**

FEI Number: 45-1986921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIMON, MICHAEL W  
3839 NW BOCA RATON BLVD  
100  
BOCA RATON, FL 33431 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: MGRM  
Name: PETERSON, MORRIS  
Address: 2500 NORTHWINDS PARKWAY #275  
City-St-Zip: ALPHARETTA, GA 30009 US

I hereby 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: MORRIS PETERSON

MGRM

02/15/2012

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