

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002613

FILED  
Apr 01, 2011  
Secretary of State

Entity Name: MCZ/CENTRUM FLORIDA XV, L.L.C.

**Current Principal Place of Business:**

225 WEST HUBBARD, 4TH FLOOR  
CHICAGO, IL 60654

**New Principal Place of Business:**

225 WEST HUBBARD, 4TH FLOOR  
CHICAGO, IL 60654 US

**Current Mailing Address:**

225 WEST HUBBARD, 4TH FLOOR  
CHICAGO, IL 60654

**New Mailing Address:**

225 WEST HUBBARD, 4TH FLOOR  
CHICAGO, IL 60654 US

FEI Number: 20-2738586

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SLAVEN, ARTHUR  
967 HILLSBORO MILE  
HILLSBORO BEACH, FL 33062 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: MGR  
Name: SLAVEN, ARTHUR  
Address: 225 WEST HUBBARD, 4TH FLOOR  
City-St-Zip: CHICAGO, IL 60654 US

Title: MGR  
Name: MCLINDEN, JOHN  
Address: 225 WEST HUBBARD, 4TH FLOOR  
City-St-Zip: CHICAGO, IL 60654 US

Title: MGR  
Name: LERNER, MICHAEL  
Address: 1555 NORTH SHEFFIELD AVE.  
City-St-Zip: CHICAGO, IL 60642 US

Title: MGR  
Name: NIVEN, BRIAN  
Address: 1555 NORTH SHEFFIELD AVE.  
City-St-Zip: CHICAGO, IL 60642 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: JOHN MCLINDEN

MGR

04/01/2011

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