

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000036327

**Entity Name:** CAPITOL FURNITURE MANUFACTURING, LLC

**Current Principal Place of Business:**

1000 SAWGRASS CORPORATE PARKWAY  
SUITE 452  
SUNRISE, FL 33323

**Current Mailing Address:**

1000 SAWGRASS CORPORATE PARKWAY  
SUITE 452  
SUNRISE, FL 33323 US

**FEI Number:** 46-5000792

**Certificate of Status Desired:** No

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

STEINMAN, ROBERT  
1000 SAWGRASS CORPORATE PARKWAY  
SUITE 452  
SUNRISE, FL 33323 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:** ROBERT J STEINMAN

01/28/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGMR  
Name STEINMAN, ROBERT J  
Address 1000 SAWGRASS CORPORATE  
PARKWAY, #452  
City-State-Zip: SUNRISE FL 33323

Title MGMR  
Name CROLL, KEN  
Address 1000 SAWGRASS CORPORATE  
PARKWAY, #452  
City-State-Zip: SUNRISE FL 33323

Title MGMR  
Name STEEL, JOAN  
Address 1000 SAWGRASS CORPORATE  
PARKWAY, #452  
City-State-Zip: SUNRISE FL 33323

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT J STEINMAN

MGRM

01/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date