

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000008104**

1. Entity Name  
**CAPTAIN WENDY SUE LLC**



Principal Place of Business  
**1132 EAST LAKE DR.  
TARPON SPRINGS, FL 34689**

Mailing Address  
**1132 EAST LAKE DR.  
TARPON SPRINGS, FL 34689**



**DO NOT WRITE IN THIS SPACE**

04262005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**36-3524603**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BRONSTEIN, JOEL D  
150 SECOND AVE. NORTH, STE. 1100  
ST PETERSBURG, FL 33701**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

000000346842  
04/30/05-80092-002 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PST  
NELSON, WENDY SUE  
1132 EAST LAKE DR  
TARPON SPRINGS, FL 34689**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 808, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

**Wendy S. Nelson**

**4/26/05**

**727-784-7624**

Date

Daytime Phone #