## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L01000008240

Entity Name
C & C CAPITAL, LLC



Mar 17, 2005 08:00 AM Secretary of State

**FILED** 

Principal Place of Business

SIGNATURE:

SIGNATURE AND TYPE

1301 RIVERPLACE BLVD., STE. 1840 JACKSONVILLE, FL 32207

Mailing Address

1301 RIVERPLACE BLVD., STE. 1840 JACKSONVILLE, FL 32207



03142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number	Applied For
59-3720871	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COLLINS, JEFFREY H 1301 RIVERPLACE BLVD., STE. 1840 JACKSONVILLE, FL 32207

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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	
Fi Di	ling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	COLLINS, JEFFREY H			
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CITY-ST-ZIP	JACKSONVILLE, FL 32207		U00000266038	
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11. I hereby of indicated limited lia	ertify that the information supplied with this filing does not on on this report is true and accurate and that my signature sha bility company or the receiver or trustee empowered to execu	ualify for the exemption stated in Section 119.07(3) all have the same legal effect as if made under oath ute this report as required by Chapter 608, Florida	Florida Statutes. I further certify that the information that I am a managing member or manager of the Statutes.	

OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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