

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010876

FILED
Apr 11, 2009
Secretary of State

Entity Name: ANDYCAP INVESTMENTS, LLC

Current Principal Place of Business:

2201 MAPLEWOOD DRIVE
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

2201 MAPLEWOOD DRIVE
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 65-1119925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, PENNY L
2201 MAPLEWOOD DRIVE
WEST PALM BEACH, FL 33415 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 () Delete
Name: KISIELEWSKI, TERRIE L
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MGRM () Delete
Name: ANDERSON, PENNY L
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MGRM () Delete
Name: ANDERSON, DAVID L
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MGRM () Delete
Name: ANDERSON, STEVEN W
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MGRM () Delete
Name: ANDERSON, DANIEL H
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MGRM () Delete
Name: KAVANAGH, NANCY A
Address: 2201 MAPLEWOOD DRIVE
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: PENNY L. ANDERSON

MGRM

04/11/2009

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