## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L02000004240**

1. Entity Name

NATIONAL CAPITAL MANAGEMENT FLORIDA, LLC



FILED
Mar 10, 2008 08:00 AN
Secretary of State

Principal Place of Business

2203 E HILLCREST ST ORLANDO, FL 32803 Mailing Address

2203 E HILLCREST ST ORLANDO, FL 32803



03042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Ī	Applied For
04-3606517		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

ALGIER, FOSTER 2203 E HILLCREST ST ORLANDO, FL 32803 DO NOT WRITE

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 (NOT	E Registered Agent signature required when reinstating)	DATE	
FILE After May	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		For A Thirth Philips	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.

SIGNATURE:

JRE: Joste Class Foster Algi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/7/08

407-897-091

Daytime Phone #