

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018214

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: CAP INVESTMENT GROUP, LLC

## Current Principal Place of Business:

7855 ARGYLE FOREST BLVD.  
SUITE 304  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

## Current Mailing Address:

7855 ARGYLE FOREST BLVD.  
SUITE 304  
JACKSONVILLE, FL 32244

## New Mailing Address:

FEI Number: 47-0897646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WELCH, ALLAN P  
7855 ARGYLE FOREST BLVD.  
SUITE 304  
JACKSONVILLE, FL 32244 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: MGR ( ) Delete  
Name: WELCH, ALLAN P  
Address: 5620 LA MOYA AVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGRM ( ) Delete  
Name: WELCH, CATHERINE B  
Address: 5620 LA MOYA AVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGRM ( ) Delete  
Name: WELCH, CRAIG D  
Address: 4831 ROSSIE LANE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGRM ( ) Delete  
Name: WELCH, THOMAS A  
Address: 12282 WINTERSET CT.  
City-St-Zip: JACKSONVILLE, FL 32225

## 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  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALLAN P WELCH

MGR

04/12/2007

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