## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L02000024398

1. Entity Name
CAPTIVA SOUND - 1, LLC



**Secretary of State** 01-27-2006 90074 006 \*\*\*\*50.00

**FILED** 

Jan 27, 2006 8:00 am

Principal Place of Business

Place of Business

3613 DEL PRADO BLVD. CAPE CORAL, FL 33904 3613 DEL PRADO BLVD. CAPE CORAL, FL 33904

Mailing Address



01202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 56-2301272 .

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MANSSON, ANDERS 3613 DEL PRADO BLVD. CAPE CORAL, FL 33904

SIGNATURE: :

## 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, 2006		
9.	. MANAGING MEMBERS/MANAGERS	
TITLE ·	MGR	
NAME .	MANSON, ANDERS	
STREET ADDRESS	3613 DEL PRADO BLVD	
CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE	MGR	
NAME	HAYWOOD, STEPHEN	
STREET ADDRESS	3613 DEL PRADO BLVD.	
CITY-ST-ZIP	CAPE CORAL, FL 33904	
TITLE		
NAME		
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE