

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000915

Entity Name: CAPITAL CITY APPRAISAL, LLC

FILED  
Apr 22, 2007  
Secretary of State

**Current Principal Place of Business:**

2417 FLEISCHMAN ROAD STE. 3  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

2417 FLEISCHMAN ROAD  
STE #3  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

PO BOX 14173  
TALLAHASSEE, FL 32317

**New Mailing Address:**

FEI Number: 16-1649521      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROBINSON, CHARLES G  
2417 FLEISCHMAN ROAD STE. 3  
TALLAHASSEE, FL 32308      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: ROBINSON, CHARLES G  
Address: 2417 FLEISCHMAN ROAD STE. 3  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES:**

Title: PRES      (X) Change ( ) Addition  
Name: ROBINSON, CHARLES G  
Address: 2417 FLEISCHMAN ROAD STE. 3  
City-St-Zip: TALLAHASSEE, FL 32308

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: CHARLES G. ROBINSON

PRES

04/22/2007

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