

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000045940

**FILED**  
**Feb 28, 2006**  
**Secretary of State**

**Entity Name:** CAPITAL ASSET PARTICIPATION, LLC

**Current Principal Place of Business:**

6542 4TH STREET SOUTH  
ST. PETERSBURG, FL 33705 US

**New Principal Place of Business:**

**Current Mailing Address:**

6542 4TH STREET SOUTH  
ST. PETERSBURG, FL 33705 US

**New Mailing Address:**

**FEI Number:**  **FEI Number Applied For ( )**  **FEI Number Not Applicable (X)**  **Certificate of Status Desired ( )**

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

ICELY, WILLIAM R III  
6542 4TH STREET SOUTH  
ST. PETERSBURG, FL 33705 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: ICELY, BILL  
Address: 6542 4TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705 US

**ADDITIONS/CHANGES:**

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: WILLIAM R. ICELY III MGR 02/28/2006

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