

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053205

Entity Name: 16825 CAPTIVA DRIVE, LLC

**FILED**  
**Feb 01, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

P.O. BOX 41  
CAPTIVA, FL 33924

**New Principal Place of Business:**

16825 CAPTIVA DRIVE  
CAPTIVA, FL 33924

**Current Mailing Address:**

P.O. BOX 41  
CAPTIVA, FL 33924

**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:**

KOURY, PETER L  
16825 CAPTIVA DR  
CAPTIVA, FL 33924    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:                      MGRM                      ( ) Delete  
Name:                      KOURY, PETER L  
Address:                      P.O. BOX 41  
City-St-Zip:                      CAPTIVA, FL 33924

**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: PETER L KOURY                      MGRM                      02/01/2007

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