

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003016

Entity Name: CAPITOL DEVELOPMENT USA, L.L.C.

FILED  
Feb 02, 2006  
Secretary of State

## Current Principal Place of Business:

11202 ST. JOHNS INDUSTRIAL PKWY N  
#1  
JACKSONVILLE, FL 32246

## Current Mailing Address:

11202 ST. JOHNS INDUSTRIAL PKWY N  
#1  
JACKSONVILLE, FL 32246

## New Principal Place of Business:

3740 ST JOHNS BLUFF RD S  
#16  
JACKSONVILLE, FL 32246

## New Mailing Address:

3740 ST JOHNS BLUFF RD S  
#16  
JACKSONVILLE, FL 32246

FEI Number: 20-0497175

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALSHAW, LARRY E  
11202 ST. JOHNS INDUSTRIAL PKWY #1  
JACKSONVILLE, FL 32246 US

## Name and Address of New Registered Agent:

WALSHAW, LARRY E  
3740 ST JOHNS BLUFF RD S  
#16  
JACKSONVILLE, FL 32246 US

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: LARRY WALSHAW

02/02/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: BRADY, JAMES J  
Address: 3740 ST JOHNS BLUFF RD SUITE 16  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM ( ) Delete  
Name: WALSHAW, LARRY  
Address: 3740 ST JOHNS BLUFF RD SUITE 16  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM ( ) Delete  
Name: ZUSCHLAG, GEOPPREV R  
Address: 11202 ST JOHN'S INOVOTRIAL PKWY N, # 1  
City-St-Zip: JACKSONVILLE, FL 32246

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: BRADY, JAMES G  
Address: 3740 ST JOHNS BLUFF RD S # 16  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM (X) Change ( ) Addition  
Name: WALSHAW, LARRY E  
Address: 3740 ST JOHNS BLUFF RD S #16  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM (X) Change ( ) Addition  
Name: ZUSCHLAG, GEOFF  
Address: 3740 ST JOHNS BLUFF RD S #16  
City-St-Zip: JACKSONVILLE, FL 32246

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: LARRY WALSHAW

MGR

02/02/2006

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