2007 LIMITED LIABILITY COMPANY -ANNUAL REPORT

DOCUMENT # L04000011889

1. Entity Name CAPITAL 100, LLC



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

3300 PGA BLVD, STE 330 PALM BEACH GARDENS, FL 33410 Mailing Address

3300 PGA BLVD, STE 330 PALM BEACH GARDENS, FL 33410



01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0726699

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

STANTON, ROSER C 4429 BEACON CIR WEST PALM BEACH, FL 33407

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.

allison

1515 S. FEDERAL

BOCA RATION FL 33432

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MASTRIANNI, NICHOLAS A 3300 PGA BOULEVARD PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000734846 05/10/07-80010-014 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 of the Jeceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #