

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000016232

FILED  
May 28, 2008  
Secretary of State

Entity Name: CAPSTONE CONSTRUCTION & DEVELOPMENT LLC

**Current Principal Place of Business:**

6109 MIRROR LAKE ROAD  
SARASOTA, FL 34238 US

**New Principal Place of Business:**

6408 TANAGER ST  
SARASOTA, FL 34241 US

**Current Mailing Address:**

6109 MIRROR LAKE ROAD  
SARASOTA, FL 34238 US

**New Mailing Address:**

6408 TANAGER ST  
SARASOTA, FL 34241 US

FEI Number: 20-0796661      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SAMS, LAURIE B  
2815 PROCTOR ROAD  
SARASOTA, FL 34231 US

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

JEFF, WIEGAND  
6408 TANAGER ST  
SARASOTA, FL 34241 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: JEFF WIEGAND

05/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WIEGAND, JEFFREY P  
Address: 6109 MIRROR LAKE ROAD  
City-St-Zip: SARASOTA, FL 34238 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WIEGAND, JEFFREY P  
Address: 6408 TANAGER ST  
City-St-Zip: SARASOTA, FL 34241 US

I hereby certify that the information supplied with this filing does not qualify 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: JEFF WIEGAND

MGRM

05/28/2008

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