

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2007 8:00 am**  
**Secretary of State**

01-23-2007 90057 014 \*\*\*\*55.00

**DOCUMENT # L04000074270**

1. Entity Name  
**CAPTAIN AND THE COWBOY DEVELOPMENT COMPANY  
LLC**



Principal Place of Business  
**604 MAIN STREET  
APOPKA, FL 32703**

Mailing Address  
**P.O. BOX 1008  
APOPKA, FL 32704-1008**

**60005358**



01092007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1767991**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**SPEIGEL, HOWARD  
1133 LOUISIANA AVE.  
214  
WINTER PARK, FL 32789**

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
HENRY, GONG  
P.O. BOX 1008  
APOPKA, FL 32704**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
DON, GREEN  
~~604 MAIN STREET~~  
~~APOPKA, FL 32703~~**

*P.O. Box 1008  
Apopka FL 32704*

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
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11. I hereby certify that the information supplied with this filing 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*1/10/07 4073101718*

Date

Daytime Phone #