

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000075292

**FILED**  
**Jan 12, 2010**  
**Secretary of State**

**Entity Name:** CAPITOL OUTDOOR MEDIA LLC

**Current Principal Place of Business:**

535 N.W. 39TH AVENUE  
DEERFIELD BEACH, FL 33442 US

**New Principal Place of Business:**

**Current Mailing Address:**

535 N.W. 39TH AVENUE  
DEERFIELD BEACH, FL 33442 US

**New Mailing Address:**

3286 M ST, NW  
SUITE# 300  
WASHINGTON, DC 20007 US

**FEI Number:** 20-1854980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POLIS, JOHN G  
535 N.W. 39TH AVENUE  
DEERFIELD BEACH, FL 33442 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:** MGR  
**Name:** POLIS, JOHN G  
**Address:** 535 N.W. 39TH AVENUE  
**City-St-Zip:** DEERFIELD BEACH, FL 33442

**Title:** MGR  
**Name:** TAVLARIDES, CHRISTOPHER J  
**Address:** 535 N.W. 39TH AVENUE  
**City-St-Zip:** DEERFIELD BEACH, FL 33442

I hereby 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:** JOHN G POLIS

VP

01/12/2010

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