


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000090997</b> 1. Entity Name <b>FOUR Q-CAPITAL, LLC</b>	
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Principal Place of Business <b>1074 N. ORANGE AVENUE SARASOTA, FL 34236 US</b>	Mailing Address <b>1074 N. ORANGE AVENUE SARASOTA, FL 34236 US</b>
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**DO NOT WRITE IN THIS SPACE**



01072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>20-2034332</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent

**GATES, CHAD L  
1074 N. ORANGE AVENUE  
SARASOTA, FL 34236**

**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

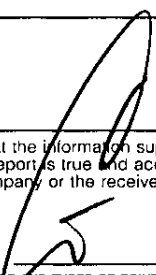
**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM GATES, CHAD L 1074 N. ORANGE AVENUE SARASOTA, FL 34236</b>
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U00000807107  
02/06/08-80069-010 138.75

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

**1/05/09 941-955-0703**  
Date Daytime Phone #