

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000009953

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** CAPTAINS DELIVERY SERVICE LLC

**Current Principal Place of Business:**

P. O. BOX 1853  
DESTIN, FL 325401853

**New Principal Place of Business:**

530 BENNING DR  
DESTIN, FL 32541

**Current Mailing Address:**

P. O. BOX 1853  
DESTIN, FL 325401853

**New Mailing Address:**

**FEI Number:** 83-0417730      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEIGH LUSBY, SHERRI  
1500 PINEHURST COVE  
NICEVILLE, FL 32578 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:** MCALLISTER, PAUL  
**Address:** 623 MOUNTAIN DRIVE  
**City-St-Zip:** DESTIN, FL 32540

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: PAUL MCALLISTER

OWNE

03/19/2012

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