

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000032883

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CAPITAL INVESTMENTS ENTERPRISE, LLC

**Current Principal Place of Business:**

4978 SOUTEL DRIVE  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

4978 SOUTEL DRIVE  
JACKSONVILLE, FL 32208 UN

**Current Mailing Address:**

5724 EARL CIRCLE NORTH  
JACKSONVILLE, FL 32219

**New Mailing Address:**

**FEI Number:** 20-2624237      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JACKSON, CLYDE A  
5724 EARL CIRCLE NORTH  
JACKSONVILLE, FL 32219 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:** JACKSON, CLYDE A  
**Address:** 5724 EARL CIRCLE NORTH  
**City-St-Zip:** JACKSONVILLE, FL 32219

**Title:** MGRM  
**Name:** JACKSON WAY, KIMBERLY N  
**Address:** 3826 HARTWOOD COURT  
**City-St-Zip:** JACKSONVILLE, FL 32216

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: KIMBERLY N JACKSON WAY

MGRM

04/30/2012

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