

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90441 040 ****50.00

DOCUMENT # L05000047465

1. Entity Name
STATON CAPITAL, LLC



Principal Place of Business
**6800 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487**

Mailing Address
**6800 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487**



03072007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2832912

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**STATON, DANIEL C
6800 BROKEN SOUND PARKWAY
SUITE 200
BOCA RATON, FL 33487**

**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 **MGR**
NAME **STATON, DANIEL C**
STREET ADDRESS **6800 BROKEN SOUND PARKWAY SUITE 200**
CITY-ST-ZIP **BOCA RATON, FL 33487**

TITLE **MGR**
NAME **STATON, MARIA B**
STREET ADDRESS **6800 BROKEN SOUND PARKWAY SUITE 200**
CITY-ST-ZIP **BOCA RATON, FL 33487**

TITLE
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IN THIS SPACE**

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

DANIEL C. STATON

3/8/07
Date

561-381-0570
Daytime Phone #