

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000055679

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Entity Name:** CAPITAL PARTNERS NETWORK, LLC

**Current Principal Place of Business:**

15 YACHT CLUB DRIVE NE  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

15 YACHT CLUB DRIVE NE  
FORT WALTON BEACH, FL 32548 US

**Current Mailing Address:**

P. O. BOX 2241  
FORT WALTON BEACH, FL 32549

**New Mailing Address:**

P. O. BOX 2241  
FORT WALTON BEACH, FL 32549 US

**FEI Number:** 04-3817407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROLLINS, JOSEPH E  
3 EGLIN DRIVE  
SHALIMAR, FL 32579 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: MR  
Name: ROLLINS, JOSEPH E MEMBER  
Address: 3 EGLIN DRIVE  
City-St-Zip: SHALIMAR, FL 32579 US

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: JOSEPH E. ROLLINS

MGRM

03/17/2011

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