

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058668

FILED
Jul 11, 2009
Secretary of State

Entity Name: CAP IT OFF, L.L.C.

Current Principal Place of Business:

240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR
SARASOTA, FL 34236

New Mailing Address:

C/O BENJAMIN R. HANAN
240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR
SARASOTA, FL 34236

FEI Number: 20-2995590 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HANAN, BENJAMIN R
240 SOUTH PINEAPPLE AVENUE, 10TH FLOOR
SARASOTA, FL 34236 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 () Delete
Name: RUBIN, HANAN
Address: 221 GLENAYR RD
City-St-Zip: TORONTO, ON M5P3CF

Title: MGR () Delete
Name: BUNNELL, DAVE
Address: 1001 CROSS TIMBERS RD, STE 2014
City-St-Zip: FLOWER MOUND, TX 750281371

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RUBIN, HANAN
Address: 7434 ALBERT TILLINGHAST DR
City-St-Zip: SARASOTA, FL 34240

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RUBIN L HANAN

MGR

07/11/2009

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