

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000122405

1. Entity Name
CAPTAINS HOUSE B3 LLC



Principal Place of Business
**268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

Mailing Address
**2703 WINDSUM WAY
TAMPA, FL 33618**



01112007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3998149

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**THOMAS, J. COLLINS
2703 WINDSUM WAY
TAMPA, FL 33618**

**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
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CULLENS, TERI T
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
THOMAS, J. COLLINS
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
THOMAS, PAMELA
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CULLENS, ZACH A IV
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CULLENS, BRYANT T
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CULLENS, DONNA K
268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034**

U000000689891
04/11/07-80053-010 50.00

**DO NOT WRITE
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: