2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# L05000122405

Entity Name: CAPTAINS HOUSE B3 LLC

Current Principal Place of Business:

268 S. FLETCHER, B-3
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

2703 WINDSUM WAY
TAMPA, FL 33618

New Mailing Address:

FEI Number: 20-3998149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, J. COLLINS
2703 WINDSUM WAY
TAMPA, FL 33618 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:	MGRM	( ) Delete
Name:	CULLENS, TERI T	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	
Title:	MGRM	( ) Delete
Name:	THOMAS, J. COLLINS	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	
Title:	MGRM	( ) Delete
Name:	THOMAS, PAMELA	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	
Title:	MGRM	( ) Delete
Name:	CULLENS, ZACH A IV	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	
Title:	MGRM	( ) Delete
Name:	CULLENS, BRYANT T	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	
Title:	MGRM	( ) Delete
Name:	CULLENS, DONNA K	
Address:	268 S. FLETCHER, B-3	
City-St-Zip:	FERNANDINA BEACH, FL 32034	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: COLLINS THOMAS MR 01/08/2009

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