

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086932

FILED
Apr 12, 2007
Secretary of State

Entity Name: CAPITAL MANAGEMENT SERVICES, L.L.C.

Current Principal Place of Business:

777 SOUTH FLAGLER
SUITE 800, WEST TOWER
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

777 SOUTH FLAGLER
SUITE 800, WEST TOWER
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 20-5498178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEFKOWITZ, IVAN M
430 N MILLS AVE
ORLANDO, FL 32803 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: TEPLITSKY, IGOR
Address: 777 SOUTH FLAGLER, SUITE 800, SO. TOWER
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: MGR () Delete
Name: TEPLITSKY, LILIAN
Address: 7367 SARIMENTO PLACE
City-St-Zip: DELRAY BEACH, FL 33446 US

Title: MGR () Delete
Name: TEPLITSKY, MARINA
Address: 7367 SARIMENTO PLACE
City-St-Zip: DELRAY BEACH, FL 33446 US

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: IGOR TEPLITSKY

MGR

04/12/2007

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