

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122349

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: THOMAS R CAPPUCCIO JR LLC

**Current Principal Place of Business:**

151419 GONZA RD.  
WEEKI WACHEE, FL 34614 US

**New Principal Place of Business:**

15149 GONZO RD.  
WEEKI WACHEE, FL 34614 US

**Current Mailing Address:**

151419 GONZA RD.  
WEEKI WACHEE, FL 34614 US

**New Mailing Address:**

15149 GONZO RD.  
WEEKI WACHEE, FL 34614 US

FEI Number: 20-8174695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPPUCCIO, THOMAS R JR  
11289 YELLOW TAIL AVE  
BROOKSVILLE, FL 34614 US

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

CAPPUCCIO, THOMAS R JR  
15149 GONZO RD.  
WEEKI WACHEE, FL 34614 US

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:

04/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CAPPUCCIO, THOMAS R JR  
Address: 11289 YELLOW TAIL AVE  
City-St-Zip: BROOKSVILLE, FL 34614 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CAPPUCCIO, THOMAS R JR  
Address: 15149 GONZO RD.  
City-St-Zip: WEEKI WACHEE, FL 34614 US

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: THOMAS R. CAPPUCCIO JR.

MGR

04/01/2009

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