

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000030798

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: CAPITAL BUILDERS, LLC

**Current Principal Place of Business:**

233 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

18 SPRINGVIEW DRIVE  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

233 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301

**New Mailing Address:**

P.O.BOX 862  
CRAWFORDVILLE, FL 32326

FEI Number: 20-8685994      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:**

HUSEMAN & MARQUINEZ, P.A.  
3733 UNIVERSITY BLVD. WEST  
SUITE 210-B  
JACKSONVILLE, FL 32217 US

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

BENJAMIN, DOUGLAS S  
18 SPRINGVIEW DRIVE  
CRAWFORDVILLE, FL 32327      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: DOUGLAS S BENJAMIN

06/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: HUSEMAN, JESSE T III  
Address: 233 OFFICE PLAZA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: MGRM      (X) Delete  
Name: BENJAMIN, DOUGLAS S  
Address: 233 OFFICE PLAZA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: BENJAMIN, DOUGLAS S  
Address: 18 SPRINGVIEW DRIVE  
City-St-Zip: CRAWFORDVILLE, FL 32327

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: DOUGLAS S BENJAMIN

MGRM

06/17/2009

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