

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002029

FILED
Mar 31, 2009
Secretary of State

Entity Name: CAPSTONE TRANSPORTATION MANAGEMENT, LLC

Current Principal Place of Business:

1319 WINDWARD CIRCLE
NICEVILLE, FL 32578 US

New Principal Place of Business:

1701 STATE ROAD 85 NORTH
SUITE 121 BOX 3
EGLIN AFB, FL 32542 US

Current Mailing Address:

1319 WINDWARD CIRCLE
NICEVILLE, FL 32578 US

New Mailing Address:

1701 STATE ROAD 85 NORTH
SUITE 121 BOX 3
EGLIN AFB, FL 32542 US

FEI Number: 26-1705869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FAGUNDES, JOSEPH M 111
1319 WINDWARD CIRCLE
NICEVILLE, FL 32578 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: FAGUNDES, JOSEPH M 111
Address: 1319 WINDWARD CIRCLE
City-St-Zip: NICEVILLE, FL 32578 US

ADDITIONS/CHANGES:

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: JOSEPH M FAGUNDES III

PRES

03/31/2009

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