

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056938

FILED  
Aug 18, 2009  
Secretary of State

Entity Name: CLUBCAPTIVA LLC

**Current Principal Place of Business:**

16447 CAPTIVA DRIVE-COTTAGE  
CAPTIVA, FL 33924

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 306 - 16447 CAPTIVA DR.  
CAPTIVA, FL 33924

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) 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:**

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

GARROW, GAIL A  
16447 CAPTIVA DRIVE-COTTAGE  
CAPTIVA, FL 33924 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GARROW, GAIL A  
Address: P.O. BOX 306  
City-St-Zip: CAPTIVA, FL 33924

Title: MGRM ( ) Delete  
Name: PHELPS, AMY KANE  
Address: P.O. BOX 306  
City-St-Zip: CAPTIVA, FL 33924

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GARROW, NATALIE  
Address: P.O. BOX 184  
City-St-Zip: CAPTIVA, FL 33924

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: NATALIE J GARROW

MGRM

08/18/2009

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