

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000104175

Entity Name: 328 CAPITOL STREET, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

C/O JOY GARGANO
328 CAPITOL STREET
NORTH FORT MYERS, FL 33903

Current Mailing Address:

C/O JOY GARGANO
P.O BOX 22
MATLACHA, FL 33993

New Principal Place of Business:

C/O MARINA P REYES
417 NW 3RD TERRACE
CAPE CORAL, FL 33993

New Mailing Address:

C/O SHANA VAUGHAN-GABOR
1122 PATTERSON RD
CAPE CORAL, FL 33909

FEI Number: 26-3797507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDY, WILLIAM
201 NICHOLAS PARKWAY WEST
CAPE CORAL, FL 33991 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: MCKEEN, CHARLES
Address: 2541 BROADWATER STREET
City-St-Zip: MATLACHA, FL 33993

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: REYES, MARINA P MGR
Address: 417 NW 3RD TERRACE
City-St-Zip: CAPE CORAL, FL 33993

Title: MGRM () Change (X) Addition
Name: VAUGHAN-GABOR, SHANA MGRM
Address: 1122 PATTERSON RD
City-St-Zip: CAPE CORAL, FL 33909 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: MARINA P REYES

MGR

04/30/2009

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