

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001602

FILED
Mar 17, 2006
Secretary of State

Entity Name: CAPITAL PROPERTIES OF LEON COUNTY, L.L.C.

Current Principal Place of Business:

1117 THOMASVILLE RD.
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12099
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3533824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOVETT, JOHN C ESQ.
106 EAST COLLEGE AVENUE, SUITE 1200
TALLAHASSEE, FL 32301 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: GUNTER, WILLIAM
Address: 1117 SAVANNA TRACE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: GUNTER, BARTLETT D
Address: 3449 MAHONEY DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: ROGERS, SAMUEL B JR.
Address: 1741 MARSTON PLACE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: ROGERS, SAMUEL B SR.
Address: 3710 GALWAY DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM (X) Delete
Name: FOREHAND, JOSH
Address: 19924 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785

ADDITIONS/CHANGES:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM GUNTER

MGMR

03/17/2006

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