

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000003046

FILED  
Feb 07, 2002 8:00 AM  
Secretary of State

**Entity Name:** WEST FLORIDA CAPITAL MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

2502 ROCKY POINT DRIVE, SUITE 670  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2502 ROCKY POINT DRIVE, SUITE 670  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-3581428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAPELLO, GREG  
2502 ROCKY POINT DRIVE, SUITE 670  
TAMPA, FL 33607 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: CAPELLO, GREG  
Address: 2502 ROCKY POINT DRIVE, SUITE 670  
City-St-Zip: TAMPA, FL 33607

**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 for the exemption stated in Section 119.07(3)(i), 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: GREG CAPELLO

MGR

02/07/2002

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