2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 01, 2007
Secretary of State

DOCUMENT# M05000003798

Entity Name: CAPTAIN CORAL PROPERTIES, LLC

Current Principal Place of Business:

18280 84TH AVENUE N.
MAPLE GROVE, MN 55311

New Principal Place of Business:

Current Mailing Address:

18496 83RD AVENUE N.
MAPLE GROVE, MN 55311

New Mailing Address:

FEI Number: 20-2999095 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, JOANN
4001 SW 23RD AVENUE
CAPE CORAL, FL 33914 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:	JONES, DANIEL D	
Address:	18280 84TH AVENUE N.	
City-St-Zip:	MAPLE GROVE, MN 55311	
Title:	MGRM	( ) Delete
Name:	BACKOUS, RICKY LEE	
Address:	2978 139TH AVENUE NW	
City-St-Zip:	ANDOVER, MN 55304	
Title:	MGRM	( ) Delete
Name:	ETHEN, TIM JOSEPH	
Address:	18496 83RD AVENUE N.	
City-St-Zip:	MAPLE GROVE, MN 55311	
Title:	MGRM	( ) Delete
Name:	JONES, SANDRA JO	
Address:	18280 84TH AVENUE N.	
City-St-Zip:	MAPLE GROVE, MN 55311	
Title:	MGRM	( ) Delete
Name:	BACKOUS, DEBORAH ANN	
Address:	2978 139TH AVENUE NW	
City-St-Zip:	ANDOVER, MN 55304	
Title:	MGRM	( ) Delete
Name:	ETHEN, LINDA JEAN	
Address:	18496 83RD AVENUE N.	
City-St-Zip:	MAPLE GROVE, MN 55311	

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:	
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: TIM ETHEN MGRM 04/01/2007

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