

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000109833

**Entity Name:** CAPITAL CITY TAX VENTURE, LLC.

**Current Principal Place of Business:**

2510 NORTH MONROE  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

P O BOX 55585  
INDIANAPOLIS, IN 46205 US

**FEI Number:** 65-1198631

**Certificate of Status Desired:** No

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

COHEN, JEREMY E  
BLACK & COHEN, P.L.L.C., ATTORNEYS AT LAW  
1435 PIEDMONT DRIVE EAST SUITE110  
TALLAHASSEE, FL 32308 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:** JEREMY E. COHEN

**04/27/2018**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	DAILY, MARK	Name	DAILY, CARMEN
Address	P O BOX 55585	Address	P O BOX 55585
City-State-Zip:	INDIANAPOLIS IN 46205	City-State-Zip:	INDIANAPOLIS IN 46205
Title	MANAGER		
Name	DAILY, STEVEN A		
Address	P O BOX 55585		
City-State-Zip:	INDIANAPOLIS IN 46205		

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CARMEN DAILY

**MGR**

**04/27/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date