

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000001602

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

**Current Principal Place of Business:**

1117 THOMASVILLE RD.  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1117 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303 US

**FEI Number:** 59-3533824

**Certificate of Status Desired:** No

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

ROGERS, SAMUEL BYRD JR.  
1117 THOMASVILLE RD.  
TALLAHASSEE, FL 32303 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:** SAMUEL B. ROGERS, JRL

01/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ROGERS, SAMUEL BJR.  
Address 1741 MARSTON PLACE  
City-State-Zip: TALLAHASSEE FL 32312

Title MGRM  
Name GUNTER, BARTLETT DAVID  
Address 515 SOUTH RIDE  
City-State-Zip: TALLAHASSEE FL 32303

*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:** SAMUEL B. ROGERS, JR.

MANAGING MEMBER

01/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date