

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021687

Entity Name: CAPE CANDLE LLC

Current Principal Place of Business:

9801 LELLA AVE
TAMPA, FL 33615

Current Mailing Address:

12620 ARBUCKLE CT
N FORT MYERS, FL 33903 US

FEI Number: 20-2253231

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOMMER, WILLIAM F
12620 ARBUCKLE CT.
NORTH FT. MYERS, FL 33903 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name SOMMER, WILLIAM F
Address 12620 ARBUCKLE CT.
City-State-Zip: NORTH FT. MYERS FL 33903

Title MGR
Name SOMMER, ROBERT P
Address 2477 SIERRA LN
City-State-Zip: PUNTA GORDA FL 33950

Title AUTHORIZED MEMBER, MANAGER
Name SOMMER, TIMOTHY E
Address 436 PINEHURST AVE
City-State-Zip: TEMPLE TERRACE FL 33617

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: WILLIAM SOMMER

MP

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date