

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A06000000903

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** CAPE MORRIS COVE PARTNERS, L.L.L.P.

**Current Principal Place of Business:**

329 NORTH PARK AVENUE  
SUITE 300  
WINTER PARK, FL 32789

**New Principal Place of Business:**

700 WEST MORSE BLVD.  
220  
WINTER PARK, FL 32789

**Current Mailing Address:**

P.O. BOX 4961  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 20-5275565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

B&C CORPORATE SERVICES OF CENTRAL FL, INC.  
390 NORTH ORANGE AVE., SUITE 1400  
ORLANDO, FL 32801 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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: CAPE MORRIS COVE MANAGERS, L.L.C.  
Address: 329 NORTH PARK AVENUE, SUITE 300  
City-St-Zip: WINTER PARK, FL 32789

**ADDRESS CHANGES ONLY:**

Address: 700 WEST MORSE BLVD., SUITE 220  
City-St-Zip: WINTER PARK, FL 32789

I hereby 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PAUL M. MISSIGMAN, MGR OF GP

MGR

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date