## 4-15-97 B- 4694 - C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(9)

DOCUMENT # LOO309
1. Corporation Name
CAPE ASSOCIATES, INC.

## FILED Apr 15 1997 8:00am Secretary of State

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|                      | e of Business<br>RAL PARKWAY<br>FL 33904  | Mailing Address 931 CAPE CORAL PARKWAY CAPE CORAL FL 33904-9015 US |                                |                      |                             |                                      |   |  |                                    |                                   |  |
|----------------------|---|--|--------------------------------|----------------------|-----------------------------|--------------------------------------|---|--|------------------------------------|-----------------------------------|--|
|                      |   |  |                                |                      |                             |                                      | 3. Date Incorporated or Qualified 07/07/1989  |  | e of Last<br>1/1996                |                                   |  |
|                      | Place of Business   | 2a. Mailing Address  |                                |                      |                             |                                      | 4. FEI Number   | 1 00,0                                       |                                    | Applied For                       |  |
| Suite, Apt.          | # ata   | 26 Suite Apl # ole   |                                |                      |                             |                                      | NOT APPLICABLE  |  |                                    |                                   |  |
| 22 Suite, Apr.       | H, etc.   | Suite, Apl. #, etc.  |                                |                      |                             |                                      | 5. Certificate of Status Desired  |  |                                    | Additional<br>Required            |  |
| City & Stat          | e   | City & State   |                                |                      |                             |                                      | 6. Election Campaign Financing \$5.00 May Be  |  |                                    |                                   |  |
| Zip                  | Country   | Zip Country  |                                |                      |                             | Trust Fund Contribution              |   |  | d to Fees                          |                                   |  |
| 24                   | 25  | 29   | 30                             | ниу                  |                             |                                      | This corporation has liability for in Florida Statutes  |  | ax under<br>No                     | s. 199.032,                       |  |
|                      | 9. Name and Address of Currer   |  | 130]                           |                      |                             |                                      | 10. Name and Address of New Reg   |  |                                    |                                   |  |
|                      | IER, LEIGH M.   | 1.5  |                                | 81                   | Nan                         | ne                                   |   |  |                                    |                                   |  |
|                      | DEL PRADO BLVD.   |  | }                              | 82                   | Stro                        | ct Addre                             | ss (P.O. Box Number is Not Acceptab   | e)   |                                    |                                   |  |
| CAP                  | E CORAL FL  |  |                                |                      |                             |                                      |   |  |                                    |                                   |  |
|                      |   |  |                                | В3                   |                             |                                      |   |  |                                    |                                   |  |
|                      |   |  |                                | 84                   | Cily                        |                                      | <b>1</b> 3  | FL   | <b>85</b> Ziji                     | o Code                            |  |
| orrice or r          | to the provisions of Sections 607 050<br>egistered agent, or hoth, in the State<br>m familiar with, and accept the oblig.   | -of Florida: Such change w   | as authorized                  | i by                 | rithe c                     | ed corpo<br>orporatio                | ration submits this statement for the prin's board of directors. I hereby accep   | reaced of a                                  | hanging<br>intment a               | its registered<br>is registered   |  |
| SIGNATURE            |   |  |                                |                      |                             |                                      |   |  |                                    |                                   |  |
| 12.                  | Signature, typed or printed hance of repotenced age<br>OF HCLRS AN  |  | NOTE Registeres                | Age                  | nt Signa                    | Line required                        | when renotating)  ADDITIONS/CHANGES TO OFFIC  | ITACI<br>COO AND                             | DIDECTO                            | 200 (F) 40                        |  |
| TITLE                | DP  | DELLE  | 1.1 117                        | LF.                  |                             |                                      | ADDITIONS/CHANGES TO OFFIC  | ~  | Change                             |                                   |  |
| NAME                 | JONES, ROBERT   |  |                                | .2 NAME              |                             | Ì                                    |   |  | _,                                 |                                   |  |
| STREET ADDRESS       | 4531 S.E. 14TH PLACE  |  | 1.3 STIVEL ADDRESS             |                      | s                           |                                      |   |  |                                    |                                   |  |
| CITY-ST-ZIP          | CAPE CORAL FL   |  | 14 CP Y- SI - 7IF              |                      |                             |                                      |   |  |                                    | :                                 |  |
| TITLE                | DV DANIE  | ☐ DETEAT   | 2 1 1114 E                     |                      |                             |                                      |   |  | Change                             | Addition                          |  |
| NAME                 | GREENE, DANIEL<br>5239 SARASOTA COURT   |  |                                | 2.2 NAME             |                             |                                      |   |  |                                    |                                   |  |
| STREET ADDRESS       | CAPE CORAL FL   |  |                                | 2.3 STREET ADDRESS   |                             | S                                    |   |  |                                    |                                   |  |
| CITY-ST-ZIP<br>TITLE | DST   | DELETE   | 2. 4 CI<br>3.1 Ti3             |                      | \$1-76                      |                                      |   |  | Change                             | Addition                          |  |
| NAME                 | GREENE, DORIS   | - 1/4 C  | 3.2 K                          |                      |                             |                                      |   | L  | Unanys                             | ☐ Worklon                         |  |
| STREET ADDRESS       | 5239 SARASOTA COURT   |  |                                |                      | ADDRES                      | s                                    |   |  |                                    |                                   |  |
| CITY-ST-ZIP          | CAPE CORAL FL   |  | 3.4 CT                         | 1Y-S                 | 1-7iP                       |                                      |   |  |                                    |                                   |  |
| TITLE                | D   | DELETE   | 4.1 10                         | l F                  |                             |                                      |   |  | Change                             | Addition                          |  |
| NAME                 | O'DONNELL, CAROLYN  |  | 4. 2 N/                        | /M(                  |                             |                                      |   |  |                                    |                                   |  |
| STREET ADDRESS       | 2815 ELECTRIC ST.   |  | 4.3 STI                        | REL 17               | ADORES                      | s                                    |   |  |                                    |                                   |  |
| CITY-ST-ZIP          | DUNMORE PA  | Duit   | 4401                           |                      | - ZIP                       |                                      |   |  | ٦ <u>۵.</u>                        |                                   |  |
| TITLE<br>NAME        |   | L_I DELETE   | 5.1 HI 6.2                     |                      |                             |                                      |   | L  | Change                             | Addition                          |  |
| STREET ADDRESS       |   |  | 5.2 NAI                        |                      | ADDRES                      |                                      |   |  |                                    |                                   |  |
| CITY-ST-ZIP          |   |  | 5 4 C/T                        |                      |                             | <u> </u>                             |   |  |                                    |                                   |  |
| TITLE                | 2000 CAN COMPANY CO. C.   | DEFLIE   |                                |                      |                             |                                      |   |  | Change                             | Addition                          |  |
| NAME                 |   |  | 6.2 NA                         | M٤                   |                             |                                      |   |  | -                                  |                                   |  |
| STREET ADDRESS       |   |  | 6.3 SH                         | RE17                 | ADDRES                      | ŝ                                    |   |  |                                    |                                   |  |
| CITY-ST-ZIP          |   |  | 6.4 C/1                        |                      |                             | <u> </u>                             |   |  |                                    |                                   |  |
| l am an ol           | by certily that the information surflict<br>in indicated on this annual report is<br>flicer or director of the conformion or<br>in Block 12 or Block 13 if changed or | upplemental amual report<br>the receiver ar flustee emp            | is true and a<br>lowered to ex | KBOT<br>CONI<br>SXGU | nptior<br>rate a<br>ute thi | stated in<br>nd that m<br>s report a | n Section 119.07(3)(i), Florida Statutes<br>ly signature shall have the same legal<br>lis required by Chapter 607, Florida St | . I further o<br>effect as it<br>atutes; and | ertify tha<br>made ur<br>I that my | it the<br>nder eath; that<br>name |  |