

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004593

FILED  
Apr 27, 2004  
Secretary of State

**Entity Name:** SOUTH CAPE VENTURES, LLC

**Current Principal Place of Business:**

1701 GULF STAR DR.  
S. # 102  
NAPLES, FL 34112 US

**New Principal Place of Business:**

**Current Mailing Address:**

9017 WHIMBREL WATCH LN.  
# 101  
NAPLES, FL 34109 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

PAPA, HUGO  
8805 TAMIAMI TRL. N.  
#122  
NAPLES, FL 34108 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: ANDREWS, REBECCA D  
Address: 1701 GULF STAR DR. S. # 102  
City-St-Zip: NAPLES, FL 34112 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANDREWS REBECCA D.                      MGR                      04/27/2004

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date