

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025510

FILED
Jan 09, 2006
Secretary of State

Entity Name: CAPE CORAL INVESTMENT ASSOCIATES, LLC

Current Principal Place of Business:

3670 SW 106TH TERRACE
DAVIE, FL 33328

New Principal Place of Business:

2718 SHERIDAN STREET
HOLLYWOOD, FL 33020

Current Mailing Address:

3670 SW 106TH TERRACE
DAVIE, FL 33328

New Mailing Address:

2718 SHERIDAN STREET
HOLLYWOOD, FL 33020

FEI Number: 57-1178239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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/MANAGERS:

Title: MGR () Delete
Name: SCJARROTTA, JOSEPH
Address: 3670 SW 106TH TERRACE
City-St-Zip: DAVIE, FL 33328

Title: MGR () Delete
Name: SCJARROTTA, JOSEPH
Address: 130 SOUTH UNIVERSITY DRIVE, SUITE D
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: SCJARROTTA, ANITA
Address: 3670 SW 106TH TERRACE
City-St-Zip: DAVIE, FL 33328

Title: D () Delete
Name: SCJARROTTA, JOSEPH
Address: 3670 SW 106TH TERRACE
City-St-Zip: DAVIE, FL 33328

Title: D (X) Delete
Name: SCJARROTTA-LYON, KRISTY
Address: 2751 TAFT STREET, APT. 404
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SCJARROTTA, JOSEPH
Address: 2718 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR (X) Change () Addition
Name: SCJARROTTA, ANITA
Address: 2718 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: D (X) Change () Addition
Name: SCJARROTTA, JOSEPH A
Address: 2718 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33020

Title: D (X) Change () Addition
Name: SCJARROTTA-LYON, KRISTY
Address: 2751 TAFT STREET, APT. 404
City-St-Zip: HOLLYWOOD, FL 33020

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 Chapter 119, 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: JOSEPH SCJARROTTA

MGR

01/09/2006

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