2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028671

Entity Name: CAPE PROPERTIES, LLC

FILED Feb 28, 2005 Secretary of State

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

1730 SE 47TH TERRACE 4510 NW 27TH STREET

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33993 US

Current Mailing Address: New Mailing Address:

1730 SE 47TH TERRACE 4510 NW 27TH STREET

CAPE CORAL, FL 33904 US CAPE CORAL, FL 33993 US

FEI Number: 05-0580548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FORRESTER, JAMES H 1429 COLONIAL BLVD. 201

FORT MYERS, FL 33907 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

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM Title: () Delete BOUKHANOV, STANISLAV Name: Name:

BOUKHANOV, STANISLAV Address: 24139 SE 45TH PLACE Address: 4510 NW 27TH STREET City-St-Zip: ISSAQUAH, WA 98029 US City-St-Zip: CAPE CORAL, FL 33993 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM Name: SHEHERBAKOV, ALEXANDER Name: SHCHERBAKOV, ALEXANDER Address: 22 ILYCHEVA ST # 5 Address: 22 ILYCHEVA ST # 5

City-St-Zip: VLADIVOSTOK, NA 690018 RF City-St-Zip: VLADIVOSTOK, NA 690018 RF

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: STANISLAV BOUKHANOV **MGRM** 02/28/2005