

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000085911

Entity Name: DANIEL B. CAPE LLC

**FILED**  
**May 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5232 GALLAGHER RD  
PLANT CITY, FL 33565

**New Principal Place of Business:**

**Current Mailing Address:**

5232 GALLAGHER RD  
PLANT CITY, FL 33565

**New Mailing Address:**

FEI Number: 59-3683003      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CAPE, DANIEL B  
5232 GALLAGHER RD  
PLANT CITY, FL 33565      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/MANAGERS:**

Title: MGRM  
Name: CAPE, DANIEL B  
Address: 5232 GALLAGHER RD  
City-St-Zip: PLANT CITY, FL 33565

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 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: DANIEL B CAPE

MGRM

05/05/2010

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