

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013685

FILED
Apr 19, 2008
Secretary of State

Entity Name: KAPES BAYOU LANDING, LLC

Current Principal Place of Business:

3793 LONGFELLOW RD
TALLAHASSEE, FL 32311

New Principal Place of Business:

6141 HIDDEN OAKS LANE
NAPLES, FL 34119

Current Mailing Address:

3793 LONGFELLOW RD
TALLAHASSEE, FL 32311

New Mailing Address:

6141 HIDDEN OAKS LANE
NAPLES, FL 34119

FEI Number: 11-3743084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRACCI, STEVEN J
3793 LONGFELLOW RD
TALLAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

BRACCI, STEVEN J
6141 HIDDEN OAKS LANE
NAPLES, FL 34119 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: _____

04/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KAPES MANAGEMENT LLC,
Address: 3793 LONGFELLOW RD
City-St-Zip: TALLAHASSEE, FL 32311

Title: MGR () Delete
Name: BIEDERMANN, GAYLE
Address: 651 BIMINI AVENUE
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KAPES MANAGEMENT LLC,
Address: 6141 HIDDEN OAKS LANE
City-St-Zip: NAPLES, FL 34119

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

I hereby certify that the information supplied with this filing does not qualify 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: KAPES MANAGEMENT LLC

MGR

04/19/2008

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