

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000031356

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** CAPE PROPERTIES II, LLC

**Current Principal Place of Business:**

310 OSPREY POINT DRIVE  
OSPREY, FL 342299251 US

**New Principal Place of Business:**

**Current Mailing Address:**

310 OSPREY POINT DRIVE  
OSPREY, FL 342299251 US

**New Mailing Address:**

**FEI Number:** 20-3946498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, JOHN E  
310 OSPREY POINT DRIVE  
OSPREY, FL 34229 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:** MGRM  
**Name:** JOHN E JACKSON REV. TRUST DATED 12/14/89  
**Address:** 310 OSPREY POINT DRIVE  
**City-St-Zip:** OSPREY, FL 342299251 US

**Title:** MGRM  
**Name:** LINDA L JACKSON REV. TRUST DATED 12/14/89  
**Address:** 310 OSPREY POINT DRIVE  
**City-St-Zip:** OSPREY, FL 342299251 US

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:** JOHN E JACKSON

MGRM

04/10/2010

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