


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # L05000040262 1. Entity Name CAPE CORAL GROUP, LLC	
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Principal Place of Business 442 NW 37TH PLACE CAPE CORAL, FL 33993	Mailing Address 442 NW 37TH PLACE CAPE CORAL, FL 33993
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DO NOT WRITE IN THIS SPACE

02102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2991432	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JURSINSKI, KEVIN F
7800 UNIVERSITY PINTE DRIVE, SUITE 200
FORT MYERS, FL 33907

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GONZALEZ, ROBERT 442 NW 37TH PL CAPE CORAL, FL 33993
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

MAR. 16, 2007 239-282-5554

Date

Daytime Phone #