

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000049372

FILED
Apr 29, 2009
Secretary of State

Entity Name: CAPE CORAL BOAT CLUB, LLC

Current Principal Place of Business:

2715 E. OAKLAND PARK BLVD., SUITE 201
FT. LAUDERDALE, FL 33306

New Principal Place of Business:

2715 E. OAKLAND PARK BLVD.
STE 300
FT. LAUDERDALE, FL 33306

Current Mailing Address:

2715 E. OAKLAND PARK BLVD., SUITE 201
FT. LAUDERDALE, FL 33306

New Mailing Address:

2715 E. OAKLAND PARK BLVD.
STE 300
FT. LAUDERDALE, FL 33306

FEI Number: 75-3191560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALLERIA ASSET MANAGEMENT CORP
2715 E OAKLAND PK BLVD
STE 300
FORT LAUDERDALE, FL 33306 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 () Delete
Name: PINNACLE CONSTRUCTION OF FT. LAUD., INC.
Address: 2715 E. OAKLAND PARK BLVD., SUITE 201
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: MGRM () Delete
Name: GALLERIA ASSET MANAGEMENT, CORP
Address: 2715 E OAKLAND PK BLVD., STE 300
City-St-Zip: FT. LAUDERDALE, FL 33306

ADDITIONS/CHANGES:

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

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: FRED SENESI

M

04/29/2009

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