

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000036516

**FILED**  
**Jan 23, 2012**  
**Secretary of State**

**Entity Name:** CAPPARIS PROPERTIES LLC

**Current Principal Place of Business:**

4301 SANDS BLVD  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

4301 SANDS BLVD  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 26-2380336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRUGGER, JOHN N  
600 FIFTH AVENUE SOUTH  
SUITE 207  
NAPLES, FL 34102 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:** KEREN, AYAL  
**Address:** 4301 SANDS BLVD.  
**City-St-Zip:** CAPE CORAL, FL 33914 US

**Title:** MGRM  
**Name:** KEREN, GUY  
**Address:** 4301 SANDS BLVD.  
**City-St-Zip:** CAPE CORAL, FL 33914 US

**Title:** MGRM  
**Name:** KEREN, RAMI  
**Address:** 4301 SANDS BLVD.  
**City-St-Zip:** CAPE CORAL, FL 33914 US

**Title:** MGRM  
**Name:** KEREN, ORNA  
**Address:** 4301 SANDS BLVD.  
**City-St-Zip:** CAPE CORAL, FL 33914 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:** AYAL KEREN

MGRM

01/23/2012

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