

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096824

FILED  
May 14, 2009  
Secretary of State

Entity Name: CAPE POINT IMPORTS LLC

**Current Principal Place of Business:**

1917 76TH AVE N  
ST PETERSBURG, FL 33702

**New Principal Place of Business:**

**Current Mailing Address:**

1917 76TH AVE N  
ST PETERSBURG, FL 33702

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ELLIOTT, JUSTIN S  
1917 76TH AVE N  
ST PETERSBURG, FL 33702 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ELLIOTT, JUSTIN S  
Address: 1917 76TH AVE N  
City-St-Zip: ST PETERSBURG, FL 33702

Title: MGRM ( ) Delete  
Name: FREDRIC MCEWAN, PETER GARETH  
Address: 2000 ERVING CIR - # 6203  
City-St-Zip: OCOEE, FL 34761

**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: JUSTIN SIMON ELLIOTT

MGRM

05/14/2009

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