

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000070612

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** CAPE IMPACT SHUTTER, LLC

**Current Principal Place of Business:**

1114 SE 12TH CT.  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

**Current Mailing Address:**

1114 SE 12TH CT.  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

**FEI Number:** 27-0636566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TARANTINO, RALPH  
122 NE 16 PL UNIT 2  
CAPE CORAL, FL 33909 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:** MYNARD, DIANA  
**Address:** 4302 SW 10TH AVE.  
**City-St-Zip:** CAPE CORAL, FL 33914 US

**Title:** MGRM  
**Name:** TARANTINO, RALPH  
**Address:** 122 NE 16 PL UNIT 2  
**City-St-Zip:** CAPE CORAL, FL 33909 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:** RALPH TARANTINO

MGRM

02/09/2012

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