

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000119045

Entity Name: DE KOTER & PAUS LLC

**FILED**  
**Mar 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1513 SW 49TH TERRACE  
CAPE CORAL, FL 33914 US

**New Principal Place of Business:**

**Current Mailing Address:**

1513 SW 49TH TERRACE  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

FEI Number: 27-1493003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAUS, CATHY  
1513 SW 49TH TERRACE  
CAPE CORAL, FL 33914 US

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

PAUS, CATHY MGRM  
1513 SW 49TH TERRACE  
CAPE CORAL, FL 33914 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: CATHY PAUS

03/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PAUS, CATHY  
Address: 1513 SW 49TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGRM  
Name: DE KOTER, ROB  
Address: 3324 SE 22 PLACE  
City-St-Zip: CAPE CORAL, FL 33904 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: CATHY PAUS

MGRM

03/13/2010

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