2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State
04-05-2006 90159 039 ***150.00

DOCUMENT # P01000087124

1. Entity Name
CAPE QUALITY HOMES, INC.

Principal Place of Business	Mailing Address
1323 B CAPE CORAL PKWY EAST CAPE CORAL, FL 33904	1323 B CAPE CORAL PKWY EAST CAPE CORAL, FL 33904

66011802

01192006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1134049
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MEINS, HARTMUT O.E.
1323 B CAPE CORAL PKWY EAST
CAPE CORAL, FL 33904

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	MEINS, HARTMUT O.E;
STREET ADDRESS	1323 B CAPE CORAL PKWY EAST
CITY-ST-ZIP	CAPE CORAL, FL 33904
TITLE	P
NAME	FREIMUELLER, RUEDIGER
STREET ADDRESS	AM HANG 21 B
CITY-ST-ZIP	EGGENSTEIN, BW 76344
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hartmut Meins 04/17/06 239-549-5400
SIGNATURE AND TYPED OR PRINTED NAME OF INCOMING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

66011802

#P01000087124

TAX DEDUCTIBLE ITEM

$

BMI OF SOUTHWEST FLORIDA INC
LIC. REAL ESTATE BROKER
ESCROW ACCOUNT
1323-B CAPE CORAL PKWY E 941-549-5400
CAPE CORAL, FL 33904-9606

7071

63-215/631

02/09/06

Fl. Dep of State Div. of Corp.

Onehundredand fifty 00/100

BAL. FOR'D	
THIS ITEM	150.00
BALANCE	
DEPOSIT	
OTHER	
BAL. FOR'D	

SUNTRUST ACH RT 061000104

FEI# 65-1134049

[redacted]

©HARLAND

NOT NEGOTIABLE