

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150353

FILED
Jan 15, 2009
Secretary of State

Entity Name: CAPE CORAL FENCE CO. INC.

Current Principal Place of Business:

2029 NE 6TH PL
CAPE CORAL, FL 33909 US

New Principal Place of Business:

2029 NE 6TH PLACE
CAPE CORAL, FL 33909 US

Current Mailing Address:

106 HANCOCK BRIDGE PKWY.
UNIT D15, BOX 502
CAPE CORAL, FL 33991 US

New Mailing Address:

FEI Number: 81-0666693 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOBERT JR., JAMES L
2029 NE 6TH PL
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM, INC
813 DELTONA BLVD STE A
BOX 1347045
DELTONA, FL 32725 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: CHRISTINA CLARK FOR ALL FLORIDA FIRM, INC

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOBERT JR., JAMES L
Address: 2029 NE 6TH PL.
City-St-Zip: CAPE CORAL, FL 33909 US

Title: S () Delete
Name: LA ROSA, CESAR
Address: 1430 SE 19TH LN
City-St-Zip: CAPR CORAL, FL 33990 US

Title: T () Delete
Name: LA ROSA, JAVIER A
Address: 2105 SE 15TH PL
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINA CLARK FOR JAMES L GOBERT

P

01/15/2009

Electronic Signature of Signing Officer or Director

Date