2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100285

Entity Name: SS CAPE, INC.

FILED Jan 12, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12734 KENWOOD LANE 756 PINE ISLAND SW CAPE CORAL, FL 33991 SUITE 80

FORT MYERS, FL 33907

New Mailing Address: Current Mailing Address:

12734 KENWOOD LANE 6819-1 PORTO FINO CIRCLE SUITE 80 FORT MYERS, FL 33912 FORT MYERS, FL 33907

FEI Number: 20-1316988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TROIANO, JOSEPH A ESQ. 2320 FIRST STREET **SUITE 1000** FORT MYERS, FL 33901 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:

Date

Electronic Signature of Registered Agent

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FENNELL, CHARLOTTE A FENNELL, CHARLOTTE A Name: Name: 12734 KENWOOD LANE SUITE 80 6819-1 PORTO FINO CIRCLE Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33912

Title: DVP Title: DVP (X) Change () Addition () Delete Name: HARSHMAN, KATHY J Name: HARSHMAN, KATHY J

12734 KENWOOD LANE SUITE 80 6819-1 PORTO FINO CIRCLE Address: Address: FORT MYERS, FL 33912 City-St-Zip: FORT MYERS, FL 33907 City-St-Zip:

Title: (X) Change () Addition Title: DST () Delete DST

GRADY, SUZANNE M GRADY, SUZANNE M Name: Name: 12734 KENWOOD LANE SUITE 80 6819-1 PORTO FINO CIRCLE Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information supplied with this filing does not qualify for the 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: SUZANNE GRADY DST 01/12/2006