2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2007
Secretary of State

DOCUMENT# P04000100285

Entity Name: SS CAPE, INC.

Current Principal Place of Business:

756 PINE ISLAND SW
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

6819-1 PORTO FINO CIRCLE
FORT MYERS, FL 33912

New Mailing Address:

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

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

WINER, STEVEN I 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: STEVEN I. WINER 03/03/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: FENNELL, CHARLOTTE A
Address: 6819-1 PORTO FINO CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: DVP ( ) Delete
Name: HARSHMAN, KATHY J
Address: 6819-1 PORTO FINO CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: DST ( ) Delete
Name: GRADY, SUZANNE M
Address: 6819-1 PORTO FINO CIRCLE
City-St-Zip: FORT MYERS, FL 33912

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 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 M. GRADY DST 03/03/2007
Electronic Signature of Signing Officer or Director Date