

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000092368

Entity Name: CAPE CORAL ICE, INC.

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4201 FOWLER ST  
FORT MYERS, FL 339012612

**New Principal Place of Business:**

900 SW PINE ISLAND RD  
116  
CAPE CORAL, FL 339911981 US

**Current Mailing Address:**

PO BOX 62014  
FORT MYERS, FL 339062014

**New Mailing Address:**

PO BOX 152118  
CAPE CORAL, FL 339152118

FEI Number: 26-3552576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GOODMAN, ROBERT H PRES  
4201 FOWLER ST  
FORT MYERS, FL 339012612 US

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

GOODMAN, ROBERT H PRES  
900 SW PINE ISLAND RD  
116  
CAPE CORAL, FL 339911981 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:

03/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GOODMAN, ROBERT H PRES  
Address: 900 SW PINE ISLAND RD # 116  
City-St-Zip: CAPE CORAL, FL 339911981

I hereby 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 all other like empowered.

SIGNATURE: ROBERT H GOODMAN

PRES

03/21/2011

Electronic Signature of Signing Officer or Director

Date