# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 17, 2005**
**Secretary of State**

DOCUMENT# P99000027528

**Entity Name:** CAPE PROPERTIES, INC.

**Current Principal Place of Business:**

4315 METRO PARKWAY
SUITE 500
FORT MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

4315 METRO PARKWAY
SUITE 500
FORT MYERS, FL 33916

**New Mailing Address:**

**FEI Number: 65-0909145** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

NATIELLO, JOHN A
4315 METRO PARKWAY
SUITE 500
FORT MYERS, FL 33916 US

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

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: _____

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete
Name: PLAMBECK, BARBARA A
Address: 4315 METRO PARKWAY, SUITE 500
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete
Name: WILLIAM, LIVINGSTON I
Address: ONE CORPORATE DRIVE, STE. 3A
City-St-Zip: PALM COAST, FL 32137

Title: DVS ( ) Delete
Name: NATIELLO, JOHN A
Address: 4315 METRO PARKWAY, SUITE 500
City-St-Zip: FORT MYERS, FL 33916

Title: TAS ( ) Delete
Name: HORVATH, MARGARET
Address: 4315 METRO PARKWAY, SUITE 500
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete
Name: HOLQUIST, LAURA A
Address: 4315 METRO PARKWAY, SUITE 500
City-St-Zip: FORT MYERS, FL 33916

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: PLAMBECK, BARBARA A
Address: 4315 METRO PARKWAY, SUITE 500
City-St-Zip: FORT MYERS, FL 33916

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

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 Section 119.07(3)(i), 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: JOHN NATIELLO DVS 08/17/2005

Electronic Signature of Signing Officer or Director — Date