


2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P99000027528 1. Entity Name CAPE PROPERTIES, INC.					
Principal Place of Business 4315 METRO PARKWAY SUITE 500 FORT MYERS, FL 33916			Mailing Address 4315 METRO PARKWAY SUITE 500 FORT MYERS, FL 33916		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0909145	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NATIELLO, JOHN A 4315 METRO PARKWAY SUITE 500 FORT MYERS, FL 33916			7. Name and Address of New Registered Agent Name ROTH, JEFFREY H. Street Address (P.O. Box Number is Not Acceptable) 4315 METRO PARKWAY SUITE 500 FORT MYERS FL 33916		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u><i>Jeffrey H. Roth</i></u> Jeffrey H. Roth, VP DATE: <u>11/17/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete PLAMBECK, BARBARA A 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LIVINGSTON, WILLIAM I. ONE CORPORATE DRIVE, SUITE 3A PALM COAST, FL 32137	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS <input checked="" type="checkbox"/> Delete HUGHES, HEIDI 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	700138238627 <input type="checkbox"/> Change <input type="checkbox"/> Addition 11/24/08--01059--009 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS <input checked="" type="checkbox"/> Delete NATIELLO, JOHN A 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Delete HORVATH, MARGARET 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete HOLQUIST, LAURA A 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input type="checkbox"/> Delete ROTH, JEFFREY H 4315 METRO PARKWAY, SUITE 500 FORT MYERS, FL 33916		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVAS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Jeffrey H. Roth</i></u>			Jeffrey H. Roth, VP DATE: <u>11/17/08</u> 239-333-3300		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

FILED
08 NOV 24 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11122008 Chg-P CR2E034 (12/06)