

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027528

Entity Name: CAPE PROPERTIES, INC.

FILED  
Apr 28, 2009  
Secretary of State

## 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:

ROTH, JEFFREY H  
4315 METRO PARKWAY  
SUITE 500  
FORT MYERS, FL 33916 US

## Name and Address of New Registered Agent:

DAHL, DANIELLE M  
ONE CORPORATE DRIVE  
SUITE 3A  
PALM COAST, FL 321374715 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: DANIELLE M. DAHL

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

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

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

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

Title: DVAS (X) Delete  
Name: ROTH, JEFFREY H  
Address: 4315 METRO PARKWAY, SUITE 500  
City-St-Zip: FORT MYERS, FL 33916

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition  
Name: HOLQUIST, LAURA 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:

I hereby certify that the information supplied with this filing does not qualify 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: LAURA A. HOLQUIST

V

04/28/2009

Electronic Signature of Signing Officer or Director

Date