

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000097907

**Entity Name:** 758 CAPE VIEW, LLC

**Current Principal Place of Business:**

758 CAPE VIEW DRIVE  
FORT MYERS, FL 33919

**Current Mailing Address:**

840 DEEP LAGOON LANE  
FORT MYERS, FL 33919 US

**FEI Number:** 46-1314809

**Certificate of Status Desired:** No

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

KLEIST, KATHRYN A  
840 DEEP LAGOON LANE  
FORT MYERS, FL 33919 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:** KATHRYN KLEIST

04/29/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	MANAGING MEMBER
Name	KLEIST, KATHRYN A	Name	KLEIST, DONNA M
Address	840 DEEP LAGOON LANE	Address	6455 TANNEHILL RD
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	NASHPORT OH 43830

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHRYN KLEIST

MANAGER

04/29/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date