

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000252558

**Entity Name:** SEVEN OCEANS CAPE, LLC

**Current Principal Place of Business:**

4338 SW 5TH AVENUE  
CAPE CORAL, FL 33914

**Current Mailing Address:**

4338 SW 5TH AVENUE  
CAPE CORAL, FL 33914 US

**FEI Number: 84-3372935**

**Certificate of Status Desired: No**

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

JACKMAN, RITA  
12381 S. CLEVELAND AVENUE  
SUITE 200  
FORT MYERS, FL 33907 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	STEGEMANN, ULRICH	Name	STEGEMANN, MELANIE
Address	SCHLESSENSTR 6	Address	SCHLESSENSTR 6
City-State-Zip:	WENDEBURG DE 38176	City-State-Zip:	WENDEBURG DE 38176

*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: ULRICH STEGEMANN**

**01/19/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date