FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

8/18/2003-90163-028-$61.25-$61.25

FILED

03 SEP -8 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000044442

1. Entity Name

S. W. FL Vacation Rentals, Inc.

DO NOT WRITE IN THIS SPACE

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1639 Cape Coral Pkwy. E.	P. O. Box 1361
Suite, Apt. #, etc.: Suite # 102	Suite, Apt. #, etc.
City & State: CapeCoral, Florida	City & State: Lehigh Acres, Florida
Zip: 33904 Country: USA	Zip: 33970-1361 Country: USA

4. FEI Number 043656512 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Heinz S. Pfuner

Street Address (P.O. Box Number is Not Acceptable)

1140 Lee Blvd., Suite 101

City: Lehigh Acres FL Zip Code: 33936

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Tereasa Gleisle 1639 Cape Coral Pkwy., Cape Coral, FL 33904	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President, Secretary Harald Loidl 1140 Lee Blvd., Lehigh Acres, FL 33936	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	600022831866 09/08/03--01095--002 **97.50
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Thomas W. Pfuner 1140 Lee Blvd., Lehigh Acres, FL 33936	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**DO NOT WRITE**
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President - Treasurer Heinz S. Pfuner 1140 Lee Blvd., Lehigh Acres, FL 33936	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**IN THIS SPACE**
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Tereasa Gleisle — Tereasa Gleisle — 08/12/03 — 239-541-0093
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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