

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 07, 2002 8:00 am**  
**Secretary of State**

05-07-2002 90354 024 \*\*\*158.75

**DOCUMENT # 669626**

1. Entity Name  
**R.E. ACRES, INC.**

Principal Place of Business

**4520 SW 21ST PL.  
 CAPE CORAL FL 33914**

Mailing Address

**4520 SW 21ST PL.  
 CAPE CORAL FL 33914**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-1998686**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ **\$8.75 Additional  
 Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**RAIMONE, RAYMOND A. SABATO, J.**  
**4520 SW 21ST PL.**  
**CAPE CORAL FL 33914**

*(changed 2001  
 copy attached)*

7. Name and Address of New Registered Agent

Name **RAIMONE, SABATO J.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4520 S.W. 21ST place**  
 City **CAPE CORAL** FL Zip Code **33914**

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.

SIGNATURE **SABATO J. RAIMONE** *Sabato J. Raimone* **4-20-02**  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |  |                                 |  |  |   |
|--|--|---------------------------------|--|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PP</b><br><b>RAIMONE, SABATO J</b><br><b>4520 SW 21ST PL.</b><br><b>CAPE CORAL FL 33914</b> | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br><b>RAIMONE, SABATO J</b><br><b>4520 SW 21ST PL.</b><br><b>CAPE CORAL FL 33914</b>  | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SABATO J. RAIMONE** *Sabato J. Raimone* **4-20-02 239-542-8600**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

# 2001 UNIFORM BUSINESS REPORT (UBR)

Attachment  
B0893M

038846

DOCUMENT # 669626

1. Entity Name  
R.E. ACRES, INC.

Principal Place of Business  
4520 SW 21ST PL.  
CAPE CORAL FL 33914

Mailing Address  
4520 SW 21ST PL.  
CAPE CORAL FL 33914

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1998686

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent

RAIMONE, PHYLLIS A  
4520 SW 21ST PL.  
CAPE CORAL FL 33914

*Please NOTE That  
CURRENT Registered  
Agent WAS NOT changed  
on (2002)*

7. Name and Address of New Registered Agent

Name RAIMONE, SABATO J.

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

4520 S.W. 21ST PLACE

City CAPE CORAL

FL

Zip Code 33914

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.

SIGNATURE SABATO J. RAIMONE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when transferring)

1-7-01  
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001, Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PP  
NAME RAIMONE, PHYLLIS A.  
STREET ADDRESS 4520 SW 21ST PL.  
CITY-ST-ZIP CAPE CORAL FL 33914

☒ Delete

TITLE P  
NAME RAIMONE, SABATO J  
STREET ADDRESS 4520 SW 21ST PL.  
CITY-ST-ZIP CAPE CORAL FL 33914

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President  
NAME SABATO J. RAIMONE  
STREET ADDRESS 4520 S.W. 21ST PLACE  
CITY-ST-ZIP CAPE CORAL, FL. 33914

☒ Change

☐ Addition

☐ Change

☐ Addition

R.E. ACRES, INC.  
4520 S.W. 21ST. PLACE  
CAPE CORAL, FL 33914  
941-542-8600

PAY TO THE ORDER OF

Department of State

DATE 1-1-01

63-1409/670 02

1012

One Hundred Fifty-Eight and 75/100

\$ 158.75

DOLLARS

CAPE CORAL NATIONAL BANK  
"Your Neighborhood Bank" Member FDIC  
Cape Coral, Florida

Uniform Busg. Report  
2001 Annual Report

FOR FEI-59-1998686 Doc# 669626

SABATO J. RAIMONE

001012 067014097 0004 7852

changed, or on an attachment with an address, with all other lines empowered.

SIGNATURE:

SABATO J. RAIMONE

1-7-01

941-542-8600

CR2E034 (10/00)