

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 20, 2001 8:00 am**  
**Secretary of State**

03-20-2001 90038 044 \*\*\*150.00

0024247

**DOCUMENT # P00000080708**

1. Entry Name  
**REAL EASY REALTY, INC.**

Principal Place of Business      Mailing Address  
 12567 175 ROAD                      12567 175 ROAD  
 JUPITER FL 33478                      JUPITER FL 33478

**C0035657**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**13205 US HWY 1**                      **13205 US Hwy 1**

Suite, Apt. #, etc.                      Suite, Apt. #, etc.

# **505**                                      # **505**  
 City & State                              City & State  
**Juno Beach FL**                      **Juno Beach, FL**

4. FEI Number                              Applied For  
**65-1044564**                              Not Applicable

Zip      Country      Zip      Country      5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent      7. Name and Address of New Registered Agent

**NEEDLE, JEAN**  
 12567 175 ROAD  
 JUPITER FL 33478

Name **LINDA COLAPRETE**  
 Street Address (P.O. Box Number is Not Acceptable)  
**263 MOCCASIN TRAIL WEST**  
 City **JUPITER**      FL      Zip Code **33458**

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 *Linda Colaprete*      DATE **3/14/01**  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDST</b> <b>LINDA COLAPRETE</b> <b>263 MOCCASIN TRAIL WEST</b> <b>JUPITER, FL 33458</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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: *Linda Colaprete*      Date **3/14/01**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)