

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2003 8:00 am
Secretary of State

04-08-2003 90107 006 ***150.00

DOCUMENT # P02000127123

1. Entity Name

A & E DEVELOPMENT OF SOUTHWEST FLORIDA, INC.



Principal Place of Business

**150 SAN RAFAEL LANE
NAPLES FL 34119**

Mailing Address

**150 SAN RAFAEL LANE
NAPLES FL 34119**

2. Principal Place of Business

249 MONTEREY DRIVE

Suite, Apt. #, etc.

THE VINEYARDS

City & State

NAPLES, FLORIDA

Zip

34119

Country

U.S.A.

3. Mailing Address

249 MONTEREY DRIVE

Suite, Apt. #, etc.

THE VINEYARDS

City & State

NAPLES, FLORIDA

Zip

34119

Country

U.S.A.



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

01-0755229

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PINTER, MICHAEL R ESQ.

4328 CORPORATE SQUARE, SUITE C

NAPLES FL 34104

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 ☐ Delete
NAME **D**
STREET ADDRESS **ASPRAKIS, GEORGE**
CITY-ST-ZIP **150 SAN RAFAEL LANE
NAPLES FL 34119**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **EPPLE, ROBERT**
CITY-ST-ZIP **11870 ROSEMOUNT DRIVE
FT. MYERS FL 33913**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **249 MONTEREY DRIVE, THE VINEYARDS**
CITY-ST-ZIP **NAPLES, FLORIDA 34119**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE

ROBERT E. EPPLE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/4/03

Daytime Phone #

(239) 225-7246

CR2E034 (10/02)