

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

8/26/2008-90001-031-\$550.00-\$550.00

FILED

08 SEP 23 PM 3:38

CLERK OF STATE
TALLAHASSEE, FLORIDA



07112008 No Chg-P CR2E034 (11/05)

DOCUMENT # P05000029492

1. Entity Name
R & T DEVELOPMENT OF SOUTHWEST FLORIDA, INC.



Principal Place of Business
118 SW 49TH TERR
CAPE CORAL, FL 33914

Mailing Address
118 SW 49TH TERR
CAPE CORAL, FL 33914

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2502920

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

TRIELOFF, THOMAS K
118 SW 49TH TERR
CAPE CORAL, FL 33914

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TRIELOFF, THOMAS K
STREET ADDRESS	118 SW 49TH TERR
CITY - ST - ZIP	CAPE CORAL, FL 33914
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	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied in this filing does not qualify for the exemptions contained in Chapter 119, 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:

Thomas K Trieloff THOMAS K Trieloff

1/9/21/08 / 239 292 2830

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/23/08