

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000077991

1. Entity Name

ALEXANDER OF S.W. FLORIDA, INC.

**FILED**  
**Jul 31, 2000 8:00 am**  
**Secretary of State**

07-31-2000 90007 019 \*\*\*150.00

Principal Place of Business

1422 S.E. 22ND STREET  
CAPE CORAL FL 33990

Mailing Address

1422 S.E. 22ND STREET  
CAPE CORAL FL 33990

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0864079

Applied For

Not Applicable

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

MANZI, SALVATORE J  
1422 S.E. 22ND STREET  
CAPE CORAL FL 33990

Name

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

12843 Devonshire Lakes Circle

City

Ft. Myers

FL

Zip Code

33913

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

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	D MANZI, SALVATORE J 1422 S.E. 22ND STREET CAPE CORAL FL 33990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12843 Devonshire Lakes Circle Ft. Myers, Florida 33913
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANZI, VERONICA E 1422 S.E. 22ND STREET CAPE CORAL FL 33990 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12843 Devonshire Lakes Circle Ft. Myers, Florida 33913
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
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

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR 04-0000

**Cossentino & Orlando**

Accountants  
1402 Cape Coral Parkway  
Cape Coral, Florida 33904  
(941) 945-4939  
Fax (941) 945-4938

July 20, 2000

Florida Department of State  
Div. of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

RE: ALEXANDER OF S.W. FLORIDA, INC.  
P98000077991

Dear Ms. Brumbley:

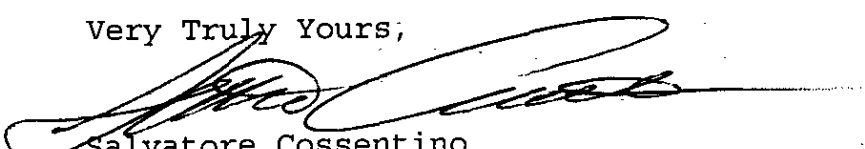
I am the Accountant for the above-mentioned client. In March of 2000 we contacted the Department of State because my client did not receive their annual filing report. Apparently, for some reason, his annual report was sent back and we are not sure why, since the address was correct when we called Tallahassee.

The bureau said another blank form would be sent immediately before the May 1, 2000 due date. In late April of 2000 we again called and informed the Department of State that we had not received a blank form. Finally, we received a second notice on July 18, 2000.

We complained to the Department of State that, due to their error, we did not feel we were liable for the \$550.00 fee. I was advised to forward this letter explaining the circumstances, and that the \$150.00 fee would be accepted.

If you should have any questions, please feel free to contact me. Thank you for your kind consideration herein.

Very Truly Yours,



Salvatore Cossentino

SC/db