

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000111210

1. Entity Name

CAPE HARBOUR REALTY, INC.

**FILED**  
May 02, 2000 8:00 am  
Secretary of State

05-02-2000 90094 026 \*\*\*150.00

Principal Place of Business

1540 SW 48TH TERR.  
CAPE CORAL FL 33914

Mailing Address

1540 SW 48TH TERR.  
CAPE CORAL FL 33914

2. Principal Place of Business

Suite, Apt. #, etc.  
1118 Lucerne Ave

City & State  
CAPE CORAL FL

Zip  
33904

Country

3. Mailing Address

Suite, Apt. #, etc.  
1118 Lucerne Ave

City & State  
CAPE CORAL FL

Zip  
33904

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0975322

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SMEDES, JOHN J  
1118 LUCERNE AVE.  
CAPE CORAL FL 33904

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/20/00

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, 2000 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 VP  
NAME John J Smedes Jr  
STREET ADDRESS 1118 Lucerne Ave.  
CITY-ST-ZIP Cape Coral FL 33904 ☐ Delete

TITLE P  
NAME JOHN J Mc Roberts  
STREET ADDRESS 138 SW 52ND TR  
CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Delete

TITLE S  
NAME Joseph J. Meyers  
STREET ADDRESS 138 SW 52ND TR  
CITY-ST-ZIP CAPE CORAL FL 33914 ☐ Delete

TITLE T  
NAME Daniel C. Brennan  
STREET ADDRESS 1118 Lucerne Ave  
CITY-ST-ZIP CAPE CORAL FL 33904 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John J. Smedes

4/20/00 941-945-7500

Date

Daytime Phone #

CR2E034 (9/99)