2000 UNIFORM BUSINESS REPORT (UBR)

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FILED DOCUMENT # **N98000002307** May 15, 2000 8:00 am Secretary of State LANDSCAPE INSPECTOR'S ASSOCIATION OF FLORIDA A L 05-15-2000 90164 019 ****61.25 Mailing Address Principal Place of Business 4611 SOUTH UNIVERSITY DRIVE 4611 SOUTH UNIVERSITY DRIVE STE 174 STE 174 FORT LAUDERDALE FL 33328 FORT LAUDERDALE FL 33328-3817 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. APPLIED FOR -0451904 Applied For City & State City & State 4. FEI Number Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent emosei SHOWALTER, LOWELL **4611 SOUTH UNIVERSITY DRIVE** STE 174 FORT LAUDERDALE FL 33328 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 (NOTE: Registered Agent signature Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. President/D ☐ Addition Change TITLE TITLE Delete Demosey, F. Gene 4611 SUniversity De Ste 174 NAME NAME CARLISLE, CARL W STREET ADDRESS STREET ADDRESS 394 FERN DR. CITY-ST-ZIP CITY-ST-ZIP **43328** Davie_ FL <u>Weston FL 33326</u> Vice President/D Delete TITLE Change Addition TITLE Bonnelitter, Patricia NAME NAME DEMPSEY, GENE F STREET ADDRESS STREET ADDRESS 4611 S University DR STE 174 Davie FL 33328 4611'S UNIVERSITY DR STE 174 CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33328 TITLE Secretary I Hoot-McLebol, Patricia STE 174 Secretary/D Change Change ☐ Addition Delete TITLE NAME NAME LEE, CASEY STREET ADDRESS STREET ADDRESS 4611 S UNIVERSITY DR STE 174 CITY-ST-7IP Davie FL 33328 CITY-ST-ZIP FORT LAUDERDALE FL 33328 Treasurer/D Change ☐ Addition Delete TITLE Berchielli, Diana L NAME NAME SIEGEL, JEFFREY L 4611 SUniversity DR STE174 STREET ADDRESS STREET ADDRESS 4611 S UNIVERSITY DR STE 174 CITY-ST-ZIP Davie 12 33328 CITY-ST-ZIP FORT LAUDERDALE FL 33328 Change ☐ Addition ☐ Delete TITLE Lee, Casey TITLE 4611 SUNIVERITY DR Ste 174 NAME WOFFORD, JEANETTE NAME STREET ADDRESS STREET ADDRESS 4611 S UNIVERSITY DR STE 174 Dave, Fi *33*327 CITY-ST-ZIE CITY-ST-ZIP FORT LAUDERDALE FL 33328 ☐ Change ☐ Addition Delete TITLE SONNELITTER, PATRICIA NAME STREET ADDRESS 4611 S UNIVERSITY DR STE 174 CITY-ST-ZIP FORT LAUDERDALE FL 33328 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 receive or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if