

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90048 006 ****61.25

DOCUMENT # N98000002307

1. Entity Name

LANDSCAPE INSPECTOR'S ASSOCIATION OF FLORIDA A L

Principal Place of Business

Mailing Address

4611 SOUTH UNIVERSITY DRIVE
 STE 174
 FORT LAUDERDALE FL 33328

4611 SOUTH UNIVERSITY DRIVE
 STE 174
 FORT LAUDERDALE FL 33328

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

65-0451904

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

SHOWALTER, LOWELL
 4611 SOUTH UNIVERSITY DRIVE
 STE 174
 FORT LAUDERDALE FL 33328

Name **Gene Dempsey**
 Street Address (P.O. Box Number is Not Acceptable) **1350 West Broward Blvd**
 City **Ft Lauderdale** FL Zip Code **33312**

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PVP	☒ Delete
NAME	CARLISLE, CARL W	
STREET ADDRESS	394 FERN DR.	
CITY-ST-ZIP	WESTON FL 33326	
TITLE	VP	☐ Delete
NAME	DEMPSEY, GENE F	
STREET ADDRESS	4611 S UNIVERSITY DR STE 174	
CITY-ST-ZIP	FORT LAUDERDALE FL 33328	
TITLE	S	☐ Delete
NAME	LEE, CASEY	
STREET ADDRESS	4611 S UNIVERSITY DR STE 174	
CITY-ST-ZIP	FORT LAUDERDALE FL 33328	
TITLE	DT	☐ Delete
NAME	SIEGEL, JEFFREY L	
STREET ADDRESS	4611 S UNIVERSITY DR STE 174	
CITY-ST-ZIP	FORT LAUDERDALE FL 33328	
TITLE	D	☐ Delete
NAME	WOFFORD, JEANETTE	
STREET ADDRESS	4611 S UNIVERSITY DR STE 174	
CITY-ST-ZIP	FORT LAUDERDALE FL 33328	
TITLE	D	☐ Delete
NAME	SONNELITTER, PATRICIA	
STREET ADDRESS	4611 S UNIVERSITY DR STE 174	
CITY-ST-ZIP	FORT LAUDERDALE FL 33328	

TITLE	PVP	☒ Change ☐ Addition
NAME	Gene Dempsey	
STREET ADDRESS	4611 S University Dr Ste 174	
CITY-ST-ZIP	Ft Lauderdale, FL 33328	
TITLE	VP	☒ Change ☒ Addition
NAME	Kimberly Pearson	
STREET ADDRESS	4611 S. University Dr Ste 174	
CITY-ST-ZIP	Ft Lauderdale, FL 33328	
TITLE	S	☒ Change ☒ Addition
NAME	Peter McKirby	
STREET ADDRESS	4611 S. University Dr Ste 174	
CITY-ST-ZIP	Ft Lauderdale, FL 33328	
TITLE	DT	☒ Change ☒ Addition
NAME	Don Goulding	
STREET ADDRESS	4611 S. University Dr Ste 174	
CITY-ST-ZIP	Ft Lauderdale, FL 33328	
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 617, 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: **Gene Dempsey** PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/01 954-828-5785

CR2E037 (10/00)