## **2003 FOR PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)** P97000004826

DOCUMENT # 1. Entity Name

JOE HANLEY'S TREE TRIMMING & LANDSCAPING, INC.

changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 



**FILED** Apr 17, 2003 8:00 am Secretary of State

04-17-2003 90142 031 \*\*\*158.75

637 FLOTILLA LANE NORTH PALM BEACH FL 33408		637 FLOTILLA	Mailing Address 637 Flotilla Lane North Palm Beach Fl 33408					
2. Principal P	ace of Business	3. Mailing Addr	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State	)	City & State	City & State			Number <b>65-0734177</b>	— <del>— —</del>	oplied For ot Applicable
Zip	Country	Zip	Cou	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of C	urrent Registered Agent			7. Nar	me and Address of New Register	red Agent	
HANLEY, FLEMING J. III 637 FLOTILLA LANE				Name Street Address (P.O. Box Number is Not Acceptable)				
							<del></del>	
NORTH PALM BEACH FL 33408				City			FL Zip Code	e
	named entity submits this stater ons of registered agent.	ment for the purpose of ch	nanging its registe	red office or regis	tered agent	t, or both, in the State of Florida. I	am familiar with,	and accept
SIGNATURE _	Signature, typed or printed name of register	ed agent and title if applicable.	(NOTE: Register	ed Agent signature requ	ired when reinst	lating) DA	WE.	
After	LE NOW!!! FEE IS \$150.0 May 1, 2003 Fee will be \$55 Payable to Florida Departm	50.00				Election Campaign Financing     Trust Fund Contribution.		0 May Be d to Fees
10. CONTROL OFFICERS AND DIRECTORS					ADDI	TIONS/CHANGES TO OFFICERS	AND DIRECTORS	S IN 11
NAME STREET ADDRESS CITY-ST-ZIP	POST HANLEY, FLEMING J. III 637 FLOTILLA LANE NORTH PALM BEACH FL 3				<del>-</del>		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				_	ਦੇ ਤਾਂ ਨਾ (⊥	प्रकार क्षेत्र क्षेत्र -	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAM STR				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAM STR				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAM STR CITY	AE EET ADDRESS Y-ST-ZIP			☐ Change	☐ Addition
indicated (	on this report or supplemental re	eport is true and accurate	and that my signa	iture shall have th	e same lega	9.07(3)(i), Florida Statutes. I further al effect as if made under oath; tha Statutes; and that my name appea	at I am an officer :	or director