## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Mar 01, 2000 8:00 am Secretary of State DOCUMENT # 188707 1. Entity Name ROOD LANDSCAPE CO., INC. 03-01-2000 90041 010 \*\*\*150.00 Principal Place of Business Mailing Address PO BOX 3768 4546 COUNTY LINE ROAD P.O. BOX 3768 TEQUESTA FL 33469-1012 TEQUESTA FL 33469-7768 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-0754733 Not Applicable Country Zìp Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROOD, ROY S Street Address (P.O. Box Number is Not Acceptable) 208 SHELTER LANE - P.O. DRAWER 1568 JUPITER FL 33458 Zip Code FI 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 at Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITLE TITLE Delete ROOD ROY S NAME NAME **208 SHELTER LANE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JUPITER FL Change Addition ☐ Delete TITLE ROOD, PATRICIA M NAME NAME 208 SHELTER LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE WHITESELL, THOMAS C NAME NAME 257 GOLFVIEW DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TEQUESTA FL Change Change ☐ Addition Delete TITLE TITLE CLATTENBURG, ALBERT NAME NAME 18235 Ridgeview Dr. STREET ADDRESS STREET ADDRESS 18235 SE RUDGEVUEW DR CITY-ST-ZIP CITY-ST-7IP **TEQUESTA FL 33469** ☐ Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 free 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 C. WHITESELL