4/6

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State
04-06-2001 90014 007 ***150.00

DOCUMENT # 271057

1. Entity Name
REINTS BROTHERS NURSERY,INC.

Principal Place of Business	Mailing Address
1520 S. ROCHELLE DR. WINTER HAVEN FL 33881	1520 S. ROCHELLE DR. WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
511 Elgin St.	511 Elgin St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sebring FL	City & State: Sebring FL
Zip: 33872 Country: Highlands	Zip: 33872 Country: Highlands

4. FEI Number 59-1010235 ☐ 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
REINTS, EDWARD D 1520 S. ROCHELLE DR. WINTER HAVEN FL 33881	Name: Greg D. Reints Street Address (P.O. Box Number is Not Acceptable): 511 Elgin Street City: Sebring FL Zip Code: 33872

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: Edward D. Reints 3/26/01
Signature (typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) 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, 2001 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD REINTS,JOHN S 850 AVE. Y N.W. WINTER HAVEN FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Greg D. Reints 511 Elgin St, Sebring, FL 33872 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST REINTS,EDWARD D 1520 LR. ROCHELLE DR. WINTER HAVEN FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~ST~~ Assistant Secretary Eric E. Reints 27094 Pacific Terrace Dr. mission Viejo, CA 92692 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Treasurer John S. Reints, Jr. 137 Masters Ave Riverside, CA — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/00)

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: Edward D. Reints EDWARD D. REINTS 3/26/01 (863) 386-3377
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #