

7/1/

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-01-2002 90352 025 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

Reints Brothers Nursery, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

511 Elgin Street
Suite, Apt. #, etc.

3. Mailing Address

511 Elgin Street
Suite, Apt. #, etc.

39362

DO NOT WRITE IN THIS SPACE

City & State

Sebring, FL

City & State

Sebring, FL

4. FEI Number

59-1010235

Applied For

Not Applicable

Zip

33875

Country

US

Zip

33875

Country

U.S.

5. Certificate of Status Desired

☐ \$8.75 Additional
 Fee Required

7. Name and Address of Current Registered Agent

Name

Gregory D. Reints

Street Address (P.O. Box Number is Not Acceptable)

511 Elgin Street

City

Sebring

FL

Zip Code

33875

DO NOT WRITE
IN THIS SPACE

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

Gregory D. Reints

7/10/02

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

 9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	President
NAME	Gregory D. Reints
STREET ADDRESS	511 Elgin Street
CITY-ST-ZIP	Sebring, FL 33875
TITLE	Secretary / Treasurer
NAME	John S. Reints, Jr.
STREET ADDRESS	137 Masters Ave.
CITY-ST-ZIP	Riverside, CA 92507
TITLE	Assistant Secretary
NAME	Eric E. Reints
STREET ADDRESS	27094 Pacific Terrace Dr.
CITY-ST-ZIP	Mission Viejo, CA 92692
TITLE	Vice-President
NAME	Edward D. Reints
STREET ADDRESS	1520 S. Rochelle Dr.
CITY-ST-ZIP	Winter Haven, FL 33881-9645
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory D. Reints

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-23-02 (863) 781-9287

Daytime Phone #

CR2E034B (12/01)