

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 am
Secretary of State

01-16-2002 90066 044 ***158.75

DOCUMENT # 340851

1. Entity Name
ARCHIE HAMLIN NURSERY, INC.

Principal Place of Business

**420 7TH AVENUE N.E.
P.O. BOX 277
RUSKIN FL 33570**

Mailing Address

**420 7TH AVENUE N.E.
P.O. BOX 277
RUSKIN FL 33570**

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

59-1280226

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

**FAGOT, CAROL
420 7TH AVE N E
RUSKIN FL 33570**

Name

Chris Gramling

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

420 - 7th Avenue NE

City

Ruskin

FL

Zip Code
33570

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 **Chris Gramling President**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/02

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, 2002 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
**PTD
FAGOT, CAROL
4047 30TH ST SE
RUSKIN FL 33570** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTD
Chris Gramling
420 - 7th Avenue NE
Ruskin, FL 33570** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
GRAMLING, CHRIS
420 7TH AVE NE
RUSKIN FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
Carol Fagot
4047 - 30th Street SE
Ruskin, FL 33570** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BOLLING, BRENT
4822 JUSTIN LN
PLANT CITY FL 33565** ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Chris Gramling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/7/02 813-645-2525
Daytime Phone #

CR2E034 (9/01)

2001 UNIFORM BUSINESS REPORT (UBR)

Attachment

DOCUMENT # 340851

705406

1. Entity Name

ARCHIE HAMLIN NURSERY, INC.

Principal Place of Business

Mailing Address

420 7TH AVENUE N.E.
P.O. BOX 277
RUSKIN FL 33570

420 7TH AVENUE N.E.
P.O. BOX 277
RUSKIN FL 33570

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 59-1280226

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

FAGOT, CAROL
420 7TH AVE N E
RUSKIN FL 33570

Name Chris Gramling
Street Address (P.O. Box Number is Not Acceptable)
420 7TH AVE N E
City RUSKIN FL Zip Code 33570

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

Chris Gramling

Chris Gramling

06/21/01

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

TITLE PTD
NAME FAGOT, CAROL
STREET ADDRESS 4047 30TH ST SE
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE VPS
NAME GRAMLING, CHRIS
STREET ADDRESS 420 7TH AVE NE
CITY-ST-ZIP RUSKIN FL ☐ Delete

TITLE D
NAME BOLLING, BRENT
STREET ADDRESS 4822 JUSTIN LN
CITY-ST-ZIP PLANT CITY FL 33565 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

13. I hereby certify that the information supplied with this indicated on this report or supplemental report is true of the corporation or the receiver or trustee empowe

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Division of Corporations
Uniform Business Report
P.O. Box 1500
Tallahassee, FL 32302-1500

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Del
Kendrick Bryant JUN 29 2001
C. Signature ☒ Agent ☐ Addre
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchar
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3400 0015 0409 8319



Attachment
340851
705406

January 07, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

You will note on copy of our attached 2001 Uniform Business Report (UBT) that the Registered Agent was changed by us, but said change is not reflected on our 2002 Uniform Business Report.

We are noting this change again on our 2002 Uniform Business Report, as well as changes to two of the officers, which we would appreciate being changed.

If you should have any questions, please feel free to call me.

Sincerely,

Christopher Gramling
President

Enclosures