

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 442166

1. Entity Name
HENDERSON TREE SERVICE, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 AUG 20 PM 2:03

Principal Place of Business
5575 NORTH MONROE STREET
TALLAHASSEE FL 32303

Mailing Address
5575 NORTH MONROE STREET
TALLAHASSEE FL 32303

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2149123

Applied For

Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HENDERSON, MARION G
RT.9 BOX 88
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE _____
NAME HENDERSON, MARION G
STREET ADDRESS 5567 N MONROE ST
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

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

TITLE _____
NAME HENDERSON, FURMAN C
STREET ADDRESS 5575 N MONROE ST
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

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

TITLE _____
NAME HENDERSON, CURTIS F JR
STREET ADDRESS 5575 N MONROE ST
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

TITLE _____
NAME _____
STREET ADDRESS 500022757205
CITY-ST-ZIP 09/04/03--01040--009 **158.75 ☐ 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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: FURMAN HENDERSON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 850-562-0033 Daytime Phone #

CR2E034 (4/03)

8-21-03

282

TO FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2003 UNIFORM BUSINESS REPORT

FROM HENDERSON TREE SERVICE INC.

5575 N. MONROE ST.

TALLAHASSEE FL. 32303

DOCUMENT # 442166 FEI # 59-2149123

TO WHOM IT MAY CONCERN

I FURMAN C. HENDERSON

THIS IS THE ONLY FILE REPORT THAT I HAVE
RECEIVED. INCLOSED PLEASE FIND FILING FEE OF
\$150.00 PLUS \$8.75 FOR CERTIFICATE OF STATE DESIRED

Thank you

Furman C. Henderson Pres.

Henderson Tree Service Inc.