

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91331 021 ***150.00

DOCUMENT # **005759** ✓

1. Entity Name

Naples Landscape Company, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1070 INDUSTRIAL BLVD

Suite, Apt. #, etc.

3. Mailing Address

1070 INDUSTRIAL BLVD

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

SA 1871995

Applied For

Not Applicable

Zip

Country

34104

US

Zip

Country

34104

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Bruce Quayle

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

1070 INDUSTRIAL BLVD

City

Naples

FL

Zip Code

34104

**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

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

Bruce Quayle
(NOTE: Registered Agent signature required when reinstating)

1 May 02
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**BRUCE QUAYLE, V.B.T.S. -
1070 INDUSTRIAL BLVD
Naples, FL 34104**

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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Bruce Quayle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 May 02 (94) 643-4900
Date Daytime Phone #