## 2000 UNIFORM BUSINESS REPORT (UBR)

## Apr 18, 2000 8:00 am Secretary of State DOCUMENT # 636048 B & L LANDSCAPE COMPANY, INC. 04-18-2000 90175 048 \*\*\*150.00 Mailing Address Principal Place of Business 7748 SPANER ROAD 7748 SPANER RD POB 24384 PO BOX 24384 JAX FL 32241 JACKSONVILLE FL 32256-1440 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1938351 Not Applicable Country Zip Zio \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent \_\_\_6. Name and Address of Current Registered Agent LEPRELL. SAMUEL L Street Address (P.O. Box Number is Not Acceptable) 1300 GULF LIFE DR JACKSONVILLE FL 32207 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE TITLE ☐ Delete Wurster, Melvin E NAME NAME 11914 OLD ACOSTA RD STREET ADDRESS STREET ADDRESS JACKSONVILLE, FL 00000 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE □ Delete TITLE WURSTER, DOROTHY L NAME NAME 11914 OLD ACOSTA RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FL 00000 VΡ -- F Change Addition ☐ Delete TITLE wurster, Kirk E. NAME NAME 3858 BOONE PARK AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL ☐ Delete TITLE Change Addition TITLE WURSTER, MELVIN E NAME NAME 11914 OLD ACOSTA RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL AS Delete TITLE ☐ Change ☐ Addition TITLE wurster. Kirk e NAME NAME STREET ADDRESS STREET ADDRESS 3858 BOONE PARK AVE

JACKSONVILLE FL .... 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

JACKSONVILLE FL

WURSTER, DOROTHY L

11914 OLD ACOSTA RD

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLÉ

NAME

THE NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Change

☐ Addition