2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2000 8:00 am
Secretary of State
01-27-2000 90177 021 ****70.00

DOCUMENT # 761615

1. Entity Name

GREENSCAPE OF JACKSONVILLE, INC.

Principal Place of Business	Mailing Address
4401 EMERSON STREET SUITE 3 JACKSONVILLE FL 32207 US	4401 EMERSON STREET SUITE 3 JACKSONVILLE FL 32207-4954 US

DO NOT WRITE IN THIS SPACE

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 59-2283261 ☐ 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
PEYTON, JOHN S 4401 EMERSON STREET JACKSONVILLE FL 32207	Name: Anna M. Dooley Street Address (P.O. Box Number is Not Acceptable): 4401 Emerson Street, Suite 3 City: Jacksonville FL Zip Code: 32207

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: Anna M. Dooley — January 20, 2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐	$5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STVP PEYTON, JOHN S P O BOX 23627 N/A JACKSONVILLE FL 32241	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Lane T. Welch 4425 Gadsden Court Jacksonville, FL 32207	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PEYTON, JOHN S P.O. BOX 23627 N/A JACKSONVILLE FL 32241	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1ST VP William Morris PO Box 41123 Jacksonville, FL 32203-1123	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MORRIS, WILLIAM H 3935 ORTEGA BLVD JACKSONVILLE FL 32210	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2nd VP Mary Pietan 1877 Beach Avenue Atlantic Beach, FL 32233	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PIETAN, MARY 1877 BEACH AVENUE ATLANTIC BEACH FL 32233	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Bruce Andrews 601 Riverside Ave Jacksonville, FL 32204	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MORRIS, WILLIAM H 3935 ORTEGA BLVD JACKSONVILLE FL 32210	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Cynthia Cash 1225 Inwood Terrace Jacksonville, FL 32207	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CASH, CYNTHIA 1225 INWOOD TERRACE JACKSONVILLE FL 32207	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VM Anna M. Dooley 4401 Emerson St. Suite 3 Jacksonville, FL 32207	☐ Change ☑ Addition

CR2E037 (9/99)

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 617, 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: Cynthia Cash REQUIRED — 1/20/2000 — 904/398 5757
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #