

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2002 8:00 am**  
**Secretary of State**

07-28-2002 90182 001 \*\*\*150.00  
 07-28-2002 90182 002 \*\*\*\*\*8.75

**DOCUMENT # F92000000172**

1. Entity Name  
**LANDDESIGN, INC.**

Principal Place of Business  
**223 NORTH GRAHAM STREET**  
**CHARLOTTE NC 28202**  
**US**

Mailing Address  
**P.O. BOX 36959**  
**CHARLOTTE NC 28236**  
**US**

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

**56-1602942**

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

**TAYLOR, DAVID R**  
**302 KNIGHTS RUN AVENUE**  
**SUITE 110**  
**TAMPA FL 33602**

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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 ☐ Delete  
 NAME **PT**  
 STREET ADDRESS **BEST, LARRY W**  
 CITY-ST-ZIP **YOUNGS ROAD**  
**SOUTHERN PINES NC 28237**

TITLE ☐ Change ☒ Addition  
 NAME **✓** **Taylor, David**  
 STREET ADDRESS **302 Knights Run Ave.**  
 CITY-ST-ZIP **Tampa, FL 33602**

TITLE ☐ Delete  
 NAME **VS**  
 STREET ADDRESS **DAVIS, BRADLEY W**  
 CITY-ST-ZIP **2720 PICARDY PLACE**  
**CHARLOTTE NC 28209**

TITLE ☐ Change ☒ Addition  
 NAME **✓** **Kocot, Marty**  
 STREET ADDRESS **38 Garfield St.**  
 CITY-ST-ZIP **Asheville, NC 28803**

TITLE ☐ Delete  
 NAME **V**  
 STREET ADDRESS **CROWLEY, PETER R**  
 CITY-ST-ZIP **155 WEST NELSON AVENUE**  
**ALEXANDRIA VA**

TITLE ☐ Change ☒ Addition  
 NAME **✓** **Wough, Ray**  
 STREET ADDRESS **223 N. Graham St.**  
 CITY-ST-ZIP **Charlotte, NC 28202**

TITLE ☐ Delete  
 NAME **V**  
 STREET ADDRESS **KISER, DWIGHT**  
 CITY-ST-ZIP **103 CENTURY OAK DR**  
**FRANKLIN TN 39069**

TITLE ☐ Change ☒ Addition  
 NAME **✓** **Dederer, David**  
 STREET ADDRESS **135 Second Ave. N**  
 CITY-ST-ZIP **Franklin, TN 37064**

TITLE ☐ Delete  
 NAME **V**  
 STREET ADDRESS **SCHWEITZER, EDWARD**  
 CITY-ST-ZIP **5227 CRESSINGHAM COURT**  
**CHARLOTTE NC**

TITLE ☐ Change ☒ Addition  
 NAME **✓** **Stewart, Dole**  
 STREET ADDRESS **223 N. Graham St.**  
 CITY-ST-ZIP **Charlotte, NC 28202**

TITLE ☐ Delete  
 NAME **V**  
 STREET ADDRESS **JORDAN, STEPHEN M**  
 CITY-ST-ZIP **8 WEST WYATT AVE**  
**ALEXANDRIA VA**

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

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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/02 910-642-2788

CR2E034 (4/02)


Attachment  
Document #

LandDesign

July 22, 2002

F92000000172

97855



Division of Corporations  
Florida Secretary of State  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: LandDesign, Inc.  
FEI 56-1602942

Dear People:

Please accept our request to waive the \$400 late filing fee related to the submission of our 2002 Uniform Business Report. The first notice we received was the one indicating that the report was due September 13, 2002. For whatever reason, no prior notice was received by our office located at 223 N. Graham Street, Charlotte, NC, or at our Charlotte post office box.

Thank you for your consideration.

Very truly yours,



Larry W. Best, President

164 NW Broad Street  
Southern Pines, NC 28387

Phone: 910.692.2788  
Fax: 910.692.2906

Offices  
Charlotte, NC  
Alexandria, VA  
High Point, NC  
Southern Pines, NC  
Franklin, TN  
Asheville, NC  
Tampa, FL

Services  
Landscape Architecture  
Land Planning  
Urban Design