

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 19, 2002 8:00 am**  
**Secretary of State**  
 02-19-2002 90058 017 \*\*\*150.00

**DOCUMENT # F98000006245**  
 1. Entity Name  
**FLORIDA EVERGREEN LAWN CARE, INC.**

Principal Place of Business Mailing Address  
**5830 ESTES LANE 5830 ESTES LANE**  
**WESLEY CHAPLE FL 33544 WESLEY CHAPLE FL 33544**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
**11500 Summitt West P.O. Box 292823**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**Tampa, FL Tampa FL**

Zip Country Zip Country  
**33617 USA 33687 USA**

4. FEI Number **59-3536462** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**MCGOUGH, JANICE**  
**5830 ESTES LN**  
**WESLEY CHAPEL FL 33544**

7. Name and Address of New Registered Agent  
 Name **Norman Morris**  
 Street Address (P.O. Box Number is Not Acceptable)  
**11500 Summitt West, Apt 24-C**  
 City **Tampa** FL Zip Code **33617**

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 **Norman Morris** President **01-27-02**  
 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. ☒ **FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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	PC	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCGOUGH, JANICE C		NAME	Norman Morris	
STREET ADDRESS	5830 ESTES LANE		STREET ADDRESS	11500 Summitt West, #24-C	
CITY-ST-ZIP	WESLEY CHAPLE FL 33544		CITY-ST-ZIP	Tampa, FL 33617	
TITLE	WV	<input checked="" type="checkbox"/> Delete	TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCGOUGH, CHRISTOPHER P		NAME	Bickey Morris	
STREET ADDRESS	5830 ESTES LANE		STREET ADDRESS	11500 Summitt West #24-C	
CITY-ST-ZIP	WESLEY CHAPLE FL 33544		CITY-ST-ZIP	Tampa, FL 33617	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRIS, LINDA C		NAME		
STREET ADDRESS	4111 JOYFUL LANE		STREET ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: **Norman Morris** President **01-27-02** (813) 985-3078  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)