

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H05715

1. Entity Name

W.T.'S LAWN & POOL SERVICE, INC.



FILED

Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90004 001 ***150.00

Principal Place of Business

% WILLIAM R. SCHENDEN
11376 SHILOH WAY
BOCA RATON FL 33428-1134

Mailing Address

% WILLIAM R. SCHENDEN
11376 SHILOH WAY
BOCA RATON FL 33428-1134

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 59-2424875

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

SCHENDEN, WILLIAM R.
11376 SHILOH WAY
BOCA RATON FL 33428

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.

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, 2000 Min. 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 P
NAME SCHENDEN, WILLIAM R.
STREET ADDRESS 11376 SHILOH WAY
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE T
NAME SCHENDEN, TIM
STREET ADDRESS 11376 SHILOH WAY
CITY-ST-ZIP BOCA RATON FL 33928 ☐ Delete

TITLE V
NAME SCHENDEN, WILLIAM T
STREET ADDRESS 11376 SHILOH WAY
CITY-ST-ZIP BOCA RATON FL 33428 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

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

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

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

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

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:

SIG. William R. Schenden
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/00 561-4837556
Date Daytime Phone #

CR25034 (5/00)

DOCUMENT # H05715

1. Entity Name

W.T.'S LAWN & POOL SERVICE, INC.

Attachment
DH# H05715
DW# 1500

Principal Place of Business

% WILLIAM R. SCHENDEN
11376 SHILOH WAY
BOCA RATON FL 33428-1134

Mailing Address

% WILLIAM R. SCHENDEN
11376 SHILOH WAY
BOCA RATON FL 33428-1134

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

59-2424875

Approved For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHENDEN, WILLIAM R.
11376 SHILOH WAY
BOCA RATON FL 33428

7. Name and Address of New Registered Agent

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

SIGNATURE

Signature of individual or previous agent and file if applicable

(NOTE: Registered Agent Signature required at all times)

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 \$150.00
After MAY 1, 2000 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

TITLE	P	☐ Delete
NAME	SCHENDEN, WILLIAM R.	
STREET ADDRESS	11376 SHILOH WAY	
CITY- ST- ZIP	BOCA RATON FL	
TITLE	T	☐ Delete
NAME	SCHENDEN, TIM	
STREET ADDRESS	11376 SHILOH WAY	
CITY- ST- ZIP	BOCA RATON FL 33928	
TITLE	V	☐ Delete
NAME	SCHENDEN, WILLIAM T	
STREET ADDRESS	11376 SHILOH WAY	
CITY- ST- ZIP	BOCA RATON FL 33428	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

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

Paul #8345
4/12/00

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(a), 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, as applicable, or on an attachment with an address, with all other like employees.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/00 561 4837556

W. T's Lawn & Pool Service Inc

Attachment
DH 110515
DD 11500

8344 E6645 D1 75 BAL BROT FORD

DATE 4/10/00 DEPOSITS 2040 50

TO AMERICAN RECYCLING

FOR <u>Dump</u>	TOTAL		
<u>VEGETATION</u>	THIS CHECK	<u>175 00</u>	
	OTHER		
TAX DEDUCTIBLE	BALANCE		

Mailed
with
13TH
OF APRIL

8345

DATE 4/12/00 DEPOSITS

TO DEPT OF STATE

FOR <u>CORP TAX</u>	TOTAL		
<u>2000 UNIFORM</u>	THIS CHECK	<u>150. 00</u>	
<u>BUSINESS REPORT</u>	OTHER		
TAX DEDUCTIBLE	BALANCE	<u>1865 50</u>	

8346

DATE 4/12/00 DEPOSITS

TO PROMTO MOWERS

FOR <u>WELDING</u>	TOTAL		
<u>BLUE TRAILER</u>	THIS CHECK	<u>85 00</u>	
	OTHER		
TAX DEDUCTIBLE	BALANCE	<u>1780 50</u>	

attachment
Doc # H05715
DW750

**William
Schenden**

11376 Shiloh Way, Boca Raton, FL 33428

DEPT OF STATE (DIV OF CORPS) 7/19/00

My original first notice was mailed on
4/13/00 with a \$150.00 check (#8345).
Apparently you did not receive it because it
never came back to me and the check is
still outstanding in my ledger.
Enclosed is a copy of the first notice.

Please accept this check #8096 for \$150.00
to catch me up to date.

William R. Schenden
President