## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT# H97488  1. Entity Name: \ VILLAGE LAWNMOWER SHOP, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA  01 JUL 17 AM 9: 29			
Principal Place of Business  VILLAGE LAWN MOWER  9267 PROSPERITY FARMS ROAD  LAKE PARK FL 33403		Mailing Address VILLAGE LAWN MOWER 9267 PROSPERITY FARMS ROAD LAKE PARK FL 33403						
2. Principal Place of Business		3. Mailing Address			\$ 100\$1011 A1\$10 10113 10081 01081 10141 \$0\$1 011		<b>                                    </b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. 1	4. FEI Number 59-2646761 Applied For Not Applicable			
Zip	Country Zip		Count	гу	5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent			
LYNN, DONALD RAY 1900 OCALA RD JUNO FL 33410				- · · · ·	(P.O. E	3ox Number is Not Acceptable)		
			Ì	City			Zip Cod	je
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 a	nd title if applicable. (NOTE:	: Registered	Agent signature require	ed when re	einstating) DA	TE	
9. This corpo Tax filing (See criter	FILE NOW!! After September 12, Make Check Payabl	2001 F	ee will be \$750		10. Election Campaign Financing     Trust Fund Contribution.		00 May Be d to Fees	
11.	OFFICERS AND DIRECTORS				AD	DITIONS/CHANGES TO OFFICERS	ND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LYNN, DONALD RAY 1900 OCALA RD JUNO FL	□ Delete		F		300004494 -07/24/01 ****150.00	-010830	<i>JU</i> 5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition
-TITLE .  NAME  STREET ADDRESS  CITY-ST-ZIP		· ≂ ⊡ · Delete ~ · ~ · s	NAME STREE		₹4 - =1		Change	- Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE CITY-S	T ADDRESS			Change	☐ Addition
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NAME STREET ADDRESS CITY-ST-ZIP	-	□ Delete ✓	City-s	T ADDRESS ST-ZIP			□ Change	
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 attackment with an address, with all other like empowered.								

**SIGNATURE:** 

10001 (561)845-1049
Daytime Phone #

497488 78396

Village Lawnmower Shop Inc 9267 Prosperity Farms Road North Palm Beach FL 33408

July 9, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whomiit May Concern:

I am writing to request that you waive the \$400.00 late fee for failing to file in a timely manner.

My father passed away on June 11, 2001. I know that this is no excuse, but I have been very busy and I just came across the second notice. I never received the first notice or I would have filed this form before the "late date."

Thank you very much for your attention.

Sincerely,

Donald Lynn

Village Lawnmower Shop Inc

PLEASE ADVISE.

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