

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90362 003 ***150.00

0053343 AV

DOCUMENT # J37426

1. Entity Name
JUDY'S TROPICAL PLANTS, INC.



Principal Place of Business
**1135 ORANGE HILL RD
CHIPLEY FL 32428
US**

Mailing Address
**P.O. 273
CHIPLEY FL 32428
US**

60016548



2. Principal Place of Business

3. Mailing Address

1109 Orange Hill Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Chipley, FL

City & State

4. FEI Number **59-2731766**

Applied For
Not Applicable

Zip **32428** Country **Washington**

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SOLGER, DAVID M.
1135 ORANGE HILL RD
CHIPLEY FL 32428**

Name **Solger Sandra L.**

Street Address (P.O. Box Number is Not Acceptable)
1109 Orange Hill Rd

City **Chipley** **FL** Zip Code **32428**

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 **Sandra L. Solger**
Signature, typed or printed name of registered agent and title if applicable.

Sandra L. Solger

(NOTE: Registered Agent signature required when reinstating)

4-7-03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
NAME **SOLGER, DAVID M.**
STREET ADDRESS **1135 ORANGE HILL RD**
CITY-ST-ZIP **CHIPLEY FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **Solger, Sandra L.**
STREET ADDRESS **1109 Orange Hill Rd**
CITY-ST-ZIP **Chipley, FL 32428**

TITLE **SD** ☒ Delete
NAME **SOLGER, JUDITH W.**
STREET ADDRESS **1135 ORANGE HILL RD**
CITY-ST-ZIP **CHIPLEY FL**

TITLE **SD** ☒ Change ☐ Addition
NAME **Solger, Brian S.**
STREET ADDRESS **1109 Orange Hill Rd**
CITY-ST-ZIP **Chipley FL 32428**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 607, 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:

Sandra L. Solger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sandra L. Solger **4-7-03**
Date Daytime Phone #

CR2E034 (10/02)