

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90113 035 ***150.00

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**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # J94779																													
1. Entity Name J. ROLAND LIEBER RENAISSANCE GARDENERS, INC.																													
Principal Place of Business BRADLEY PLACE 399 TWELFTH AVENUE SOUTH NAPLES, FL 34102			Mailing Address P.O. BOX 2035 NAPLES, FL 34106 US																										
2. Principal Place of Business BRADLEY PLACE Suite, Apt. #, etc. 399 TWELFTH AVE. S.			3. Mailing Address * PO BOX 2035 Suite, Apt. #, etc.																										
City & State NAPLES, FLORIDA			City & State NAPLES, FLORIDA																										
Zip 34102		Country COLLIER		4. FEI Number 65-0007595																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable																									
6. Name and Address of Current Registered Agent LIEBER, J. ROLAND BRADLEY PLACE 399 TWELFTH AVENUE SOUTH NAPLES, FL 33940			7. Name and Address of New Registered Agent Name: J. ROLAND LIEBER Street Address (P.O. Box Number is Not Acceptable): 399 TWELFTH AVE. SOUTH City: NAPLES FL Zip Code: 34102																										
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: 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																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME: LIEBER, J. ROLAND STREET ADDRESS: 399 TWELFTH AVENUE SOUTH CITY-ST-ZIP: NAPLES, FL 34102 </td> <td style="width: 50%; padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: LIEBER, RICHARD E. STREET ADDRESS: 399 TWELFTH AVENUE SOUTH CITY-ST-ZIP: NAPLES, FL 34102 </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Delete </td> </tr> </table>			TITLE NAME: LIEBER, J. ROLAND STREET ADDRESS: 399 TWELFTH AVENUE SOUTH CITY-ST-ZIP: NAPLES, FL 34102	☐ Delete	TITLE NAME: LIEBER, RICHARD E. STREET ADDRESS: 399 TWELFTH AVENUE SOUTH CITY-ST-ZIP: NAPLES, FL 34102	☐ 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: _____	☐ Delete	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="width: 50%; padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> <tr> <td style="padding: 2px;"> TITLE NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ </td> <td style="padding: 2px;"> ☐ Change ☐ Addition </td> </tr> </table>			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
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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: J. ROLAND LIEBER 4.29.03 239.261.4007																													

CR2034 (10/02)