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2/1**FILED**
May 01, 2002 8:00 am
Secretary of State

02-13-2002 90285 039 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # K02868**

1. Entity Name

AMERICAN SERVICES, INC.

Principal Place of Business

P. O. BOX 5085
LAKELAND FL 33807

Mailing Address

P. O. BOX 5085
LAKELAND FL 33807

2. Principal Place of Business

6916 S County Line Rd

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, FL

City & State

Zip

33811

Country

USA

Zip

Country

4. FEI Number

59-2872010

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

HARRISON, EDWARD R.
6916 S COUNTY LINE RD
LAKELAND FL 33811

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

Edward R. Harrison

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when resigning)

Date

01/30/02

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. 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	PD	TITLE	
NAME	HARRISON, EDWARD R.	NAME	
STREET ADDRESS	6916 SOUTH COUNTY LINE RD	STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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:

Edward R. Harrison

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/18/04

Daytime Phone #

8636609237

CR2034 (9/01)

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10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

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NAME HARRISON, EDWARD R.
STREET ADDRESS 6916 SOUTH COUNTY LINE RD
CITY-ST-ZIP LAKELAND FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/02

Attachment
26621

Attachment # J 6621 - K02868

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT.# 1009068796

FEB 12 2002

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6640730039

02/19/02
101 62269 81
BANK OF AMERICA, N.A. FAX

US DATE 02/19/02
P01 E C 062 C

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AMERICAN SERVICES, INC.

6916 S. COUNTY LINE RD. 863-607-8085
LAKELAND, FL 33811

10-87

5685

DATE 01/30/02

63-27/631 FL
202

PAY
TO THE
ORDER OF

Department of State # K02868

\$ 150.00

One hundred and fifty dollars

DOLLARS

Bank of America

ACH R/T 063100277

258-64-3008

FOR

Feb - 59-2872010

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