

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003 8:00 am
Secretary of State

01-10-2003 90208 021 ***150.00

DOCUMENT # K09976

1. Entity Name
JUNIPER LANDSCAPING, INC.



Principal Place of Business
**8993 CYPRESS PRESERVE PLACE
FORT MYERS FL 33912**

Mailing Address
**8993 CYPRESS PRESERVE PLACE
FORT MYERS FL 33912**



2. Principal Place of Business

3. Mailing Address

13862 Pine Villa Ln

13862 Pine Villa Ln

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Myers, FL

City & State

Fort Myers, FL

Zip

33912

Country

USA

Zip

33912

Country

USA

4. FEI Number **65-0035364**

Applied For

Not Applicable

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

**DENMAN, JAMES B ESQ.
2400 E. COMMERCIAL BLVD.
SUITE 208
FORT LAUDERDALE FL 33308**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 **D** ☐ Delete
NAME **DUKE, MICHAEL P.**
STREET ADDRESS **1502 SW 97 LANE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33324**

TITLE ☐ Change ☐ Addition
NAME **13862 Pine Villa Ln**
STREET ADDRESS **Fort Myers, FL 33912**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **DUKE, SHARON A.**
STREET ADDRESS **1502 SW 97 LANE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33324**

TITLE ☐ Change ☐ Addition
NAME **13862 Pine Villa Ln**
STREET ADDRESS **Fort Myers FL 33912**
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

CR2E034 (10/02)

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:

Sharon A. Duke

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/03

239.340.6880

Date

Daytime Phone #