

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L62499**

1. Entity Name
CROSBY LANDSCAPING, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90028 043 ***150.00

Principal Place of Business
**C/O S. SCOTT WALKER
527 EAST UNIVERSITY AVENUE
GAINESVILLE FL 32601**

Mailing Address
**C/O S. SCOTT WALKER
527 EAST UNIVERSITY AVENUE
GAINESVILLE FL 32601**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4625 NW 6th ST.
Suite, Apt. #, etc.

3. Mailing Address
4625 NW 6th ST.
Suite, Apt. #, etc.

City & State
Gainesville, Fla

City & State
Gainesville, Fla

Zip
32609

Country
Alachua

Zip
32609

Country
Alachua

4. FEI Number **59-3008054**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**WALKER, S. SCOTT
527 EAST UNIVERSITY AVENUE
GAINESVILLE FL 32601**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

City

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 _____
Signature, typewritten or printed name of registered agent and fee if applicable. (Addition of Registered Agent signature required when filing change.)

DATE _____

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, 2001 Fee will be \$650.00
Make Check Payable to Department of State

10. 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	D	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	CROSBY, RONALD EDWARD		NAME	Crosby Ronald Edward	
STREET ADDRESS	5901 N.W. 26TH STREET		STREET ADDRESS	RR 2 Box 4112	
CITY-STATE-ZIP	GAINESVILLE FL		CITY-STATE-ZIP	Lake City, Fla 32024	
TITLE	D	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	CROSBY, GLENN SCOTT		NAME	Crosby Glenn Scott	
STREET ADDRESS	5901 N.W. 26TH STREET		STREET ADDRESS	9201 NW 23RD PL.	
CITY-STATE-ZIP	GAINESVILLE FL		CITY-STATE-ZIP	GAINESVILLE, FL 32606	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-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 #1 or Block #2 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Ronald E. Crosby** **4/26/01 350-375-1080**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-Mo-Yr

CR2E034 (10/00)