

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90256 036 \*\*\*\*50.00

**DOCUMENT # L94000000473**

1. Entity Name

**ENDLESS SUMMER LANDSCAPE NURSERY, L.C.**

Principal Place of Business

12351 PERSIMMON BLVD  
 ROYAL PALM BEACH FL 33411

Mailing Address

12351 PERSIMMON BLVD  
 ROYAL PALM BEACH FL 33411

967765

2. Principal Place of Business

1128 Royal Palm Bch Blvd

3. Mailing Address

1128 Royal Palm Bch Blvd

Suite, Apt. #, etc.

#263

Suite, Apt. #, etc.

#263

City & State

Royal Palm Bch FL

City & State

Royal Palm Bch FL

Zip

33411

Country

USA

Zip

33411

Country

USA

4. FEI Number

65-0520929

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FRACALOSS, R. JOHN  
 12351 PERSIMMON BLVD  
 ROYAL PALM BEACH FL 33411

7. Name and Address of New Registered Agent

Name FRACALOSS, R. JOHN

Street Address (P.O. Box Number is Not Acceptable)

1128 Royal Palm Beach Blvd #263

City

Royal Palm Bch

FL

Zip Code

33411

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
 NAME FRACALOSS, R. JOHN  
 STREET ADDRESS 12351 PERSIMMON BLVD  
 CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE MGRM  
 NAME FRACALOSS, RONALD J SR  
 STREET ADDRESS 12351 PERSIMMON BLVD  
 CITY-ST-ZIP ROYAL PALM BEACH FL 33411

TITLE MGRM  
 NAME FRACALOSS, JOANNE  
 STREET ADDRESS 12351 PERSIMMON BLVD.  
 CITY-ST-ZIP ROYAL PLAM BEACH FL 33411

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM  
 NAME FRACALOSS, R. JOHN  
 STREET ADDRESS 1128 Royal Palm Bch Blvd #263  
 CITY-ST-ZIP Royal Palm Bch, FL 33411

TITLE MGRM  
 NAME FRACALOSS, RONALD J  
 STREET ADDRESS 1128 Royal Palm Bch Blvd #263  
 CITY-ST-ZIP Royal Palm Beach, FL 33411

TITLE MGRM  
 NAME FRACALOSS, JOANNE  
 STREET ADDRESS 1128 Royal Palm Bch Blvd #263  
 CITY-ST-ZIP Royal-Palm Bch, FL 33411

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

561-790-7906