

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003247

1. Entity Name

KEEP TRI-COUNTIES BEAUTIFUL, INC.

Principal Place of Business

ROUTE 1, BOX 375
RAIFORD FL 32083

Mailing Address

P.O. BOX 647
RAIFORD FL 32083

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3492563

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CROFT, JAMES
ROUTE 1, BOX 375
RAIFORD FL 32083

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME BREMAN, JACQUE
STREET ADDRESS 25 NORTH FIRST ST.
CITY-ST-ZIP LAKE BUTLER FL

TITLE ☐ Delete

NAME KETT, SUSAN
STREET ADDRESS P.O. BOX 70 N/A
CITY-ST-ZIP OLUSTEE FL

TITLE ☐ Delete

NAME ALLEN, HERMAN W
STREET ADDRESS RT. 4 BOX 2490
CITY-ST-ZIP LAKE BUTLER FL 32054

TITLE ☐ Delete

NAME WISE, D
STREET ADDRESS 925 E. NORTH TEMPLE
CITY-ST-ZIP STARKE FL

TITLE ☐ Delete

NAME JAMERSON, MIKE
STREET ADDRESS POB 753
CITY-ST-ZIP ALACHUA FL 32615

TITLE ☐ Delete

NAME LOWERY, MARK
STREET ADDRESS P.O. BOX 669
CITY-ST-ZIP GLEN ST. MARY FL 32040

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jan 29, 2002 8:00 am
Secretary of State

01-29-2002 90043 025 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)

Keep Tri-counties Beautiful, Inc.
Additional Officers/Directors

ATTACHMENT

N 96000003247

301076

D Judy Butterfield 2266 N. Temple Ave. Starke, FL 32091	D Sheldon Beasley Rt. 1, Box 480A Macclenny, FL 32063
D Vick Givens P.O. Box 346 N/A Sanderson, FL 32087	DS Eoline Underhill Rt. 1, Box 861 Starke, FL 32091
D Irma Clyatt Rt. 2, Box 260 Lake Butler, FL 32054	D Nell Dowling P.O. Box 93 N/A Olustee, FL 32072
D William S. Sumpter P.O. Box 808 N/A Lake Butler, FL 32054	D Betty Emerick Rt. 4, Box 3596 Lake Butler, FL 32054
D Beth Mock 172 N. Blvd., West Macclenny, FL 32063	D David Wright P.O. Box 753 N/A Starke, FL 32091