

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002454

1. Entity Name

TURF EQUIPMENT SERVICE TECHNICIANS ASSOCIATION.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90131 012 ****61.25

Principal Place of Business

Mailing Address

POST OFFICE BOX 1333
BONITA SPRINGS FL 33959

POST OFFICE BOX 1333
BONITA SPRINGS FL 34133-1333

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3438476

Applied For

Not Applicable

Zip

Country

Zip

Country

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

AHLADIS, ANGELA A
18534 QUINCE RD.
FT. MYERS FL 33912

Name

KOOPMAN, GEORGE M.

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

11700 COLLIER'S RESERVE DR.

City

NAPLES, FL

FL

Zip Code

34110

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

George M. Koopman

GEORGE M. KOOPMAN

2-17-00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete
NAME AHLADIS, ANGELO L
STREET ADDRESS 18534 QUINCE RD.
CITY-ST-ZIP FT MYERS FL 33912

TITLE D ☒ Change ☐ Addition
NAME KOOPMAN, GEORGE M.
STREET ADDRESS 11700 COLLIER'S RESERVE DR
CITY-ST-ZIP NAPLES, FL 34110

TITLE D ☒ Delete
NAME DEHART, BOB
STREET ADDRESS 4815 ESPLANADE STREET
CITY-ST-ZIP BONITA SPRINGS FL 33923

TITLE D ☒ Change ☐ Addition
NAME RICHARD, JAMES
STREET ADDRESS 2700 WILLOWOOD BLVD
CITY-ST-ZIP NAPLES, FL 34120

TITLE D ☐ Delete
NAME COOK, TIM
STREET ADDRESS 3170 S. HORSESHOE DRIVE
CITY-ST-ZIP NAPLES FL 34104

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME JIMENEZ, JORGE L
STREET ADDRESS 13013 THIRD ST.
CITY-ST-ZIP FT MYERS FL 33905

TITLE T ☒ Change ☐ Addition
NAME JIMENEZ, JORGE L.
STREET ADDRESS 915 ANZA AVE
CITY-ST-ZIP Lehigh Acres FL 33971

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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:

George M. Koopman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-17-00 941-597-7063

CR2E037 (9/99)