

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000003796

1. Entity Name

RON BUTLER LANDSCAPING & SODDING, INC.

Principal Place of Business

3331 JUPITER RD.
QUINCY FL 32351

Mailing Address

3331 JUPITER RD.
QUINCY FL 32351

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUTLER, RONALD G
3331 JUPITER RD.
QUINCY FL 32351

Name Ronald G. Butler

Street Address (P.O. Box Number is Not Acceptable)
36 West 8th Street

Greensboro

City FL.

FL

Zip Code 32330

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

Ronald Butler

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

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
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
NAME Ronald G. Butler ☐ Delete
STREET ADDRESS 36 West 8th Street P
CITY-ST-ZIP Greensboro, FL 32330

TITLE
NAME 200004161502-0 ☐ Change ☐ Addition
STREET ADDRESS -05/08/01--01033--022
CITY-ST-ZIP ****150.00 ****150.00

TITLE
NAME Sandra Butler ☒ Delete
STREET ADDRESS 3331 Jupiter Road
CITY-ST-ZIP Quincy, FL 32351

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald Butler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
01 APR 23 AM 8:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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