

# 2001 UNIFORM BUSINESS REPORT (UBR)

1 of 2

Amended

02 JAN 11 PM 3:22

**DOCUMENT #** P000000 350691

**1. Entity Name**  
Go Natural Native Plants, Inc.

**Principal Place of Business**      **Mailing Address**  
2035 Edgewood Dr. S  
Lakeland, FL 33803

<b>2. Principal Place of Business</b> Same		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

Country: POIK

**4. FEI Number** 59-3643392      **Applied For** Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
Gilbert M. Daigneau  
2035 Edgewood Dr. South  
Lakeland FL 33803

**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: *Gilbert M. Daigneau* Remain the Same 12/5/01  
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 \$550.00**  
**After September 12, 2001, Fee will be \$750.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**  
Trust Fund Contribution

11. OFFICERS AND DIRECTORS	
TITLE <i>P</i> NAME STREET ADDRESS CITY-ST-ZIP	<i>Gilbert M. Daigneau</i> <input type="checkbox"/> Delete <i>2035 Edgewood Dr S</i> <i>Lakeland FL</i>
TITLE <i>VP</i> NAME STREET ADDRESS CITY-ST-ZIP	<i>Donald L Tate</i> <input checked="" type="checkbox"/> Delete <i>2500 21ST ST NW #86</i> <i>Winter Haven FL 33881</i>
TITLE <i>SIT</i> NAME STREET ADDRESS CITY-ST-ZIP	<i>Joyce K Tate</i> <input checked="" type="checkbox"/> Delete <i>2500 21ST ST NW #86</i> <i>Winter Haven, FL 33881</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <del>VP</del> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>300004784603-2</i> <i>-01/18/02--01053--024</i> <i>*****61.25 *****61.25</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** *Gilbert M. Daigneau* 12/5/01 863-665-7222  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (5/01)

2052

December 5, 2001  
2035 Edgewood Dr. S.  
Lakeland, FL. 33803

Florida Department of State  
Division of Corporations  
P. O. Box 1500  
Tallahassee, Florida 32302-1500

Subject: Form 2001 Uniform Business Report

The purpose of this form being subjected is to remove Donald L. Tate and Joyce K. Tate as officers of the business "Go Natural Native Plants, Inc."

Would you please review this and respond to us when the change has been recorded and these names deleted?

You will find enclosed the fee of sixty-one dollars and twenty-five cents (\$61.25).

Please send confirmation to Donald & Joyce K. Tate  
2500 21<sup>st</sup> St. NW #86  
Winter Haven, FL. 33881

Our phone number is 863-293-0982. The President of the Corporation is Gilbert M. Daigneau. His phone number is 863-665-7722.

Thank you,

*JK Tate*  
Joyce K. Tate

Attached: Form 2001 UBR  
Check # 1108 (\$61.25)