Sep 18, 2001 8:00 am Secretary of State

09-18-2001 90003 011 ***550 00

2001 UNIFORM BUSINESS REPORT (UBR)

P00000059349

DOCUMENT # 1. Entity Name

PEOPLES CHOICE LANDSCAPING INC.

Principal Place of Business

Mailing Address

1139 STAGHORN ST WELLINGTON FL 33414 1139 STAGHORN ST WELLINGTON FL 33414

	·	
2. Principal Place of Business	3. Mailing Address	
4738 PALM BEACH	DANAL ROAD	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.	



DO NOT WRITE IN THIS SPACE

DATE

		l			
City & S	tate	City & State		4. FEI Number	Applied For
MEST	PALM BEACH FL			65-1015791	Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	S8.75 Additional
.3340	5_ U.SA			5. Certificate of Status Desired	Fee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		

PEOPLES, WILLIAM T 1139 STAGHORN ST WELLINGTON FL 33414

(See criteria on back)

SIGNATURE

Charles Chock

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

(NOTE: Registered Agent signature required when reinstating)

Palm Beach CANAI

City Zip Code BEACH MUM 33.U15 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.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

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

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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME PEOPLES, WILLIAM T NAMÉ 4738 PALM BEACH CLANAL ROAD 1139 STAGHORN ST STREET ADDRESS STREET ADDRESS WELLINGTON FL 33414 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME WOMACK, DAVID A NAME PALM BEACH CLANAL ROAD STREET ADDRESS 1139 STAGHORN ST STREET ADDRESS CITY-ST-ZIP WELLINGTON FL 33414 CITY-ST-ZIP BEACH _6 - Change - Addition TITLE " - Delete - - -TITLE -4202 YAND WAY NAME BROWN, JENNIFER A NAME 1139 STAGHORN ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON FL 33414 CITY-ST-ZIP 334<u>07</u> TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP



Delete

☐ Change

Addition