

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000060384

1. Entity Name

CREATIVE CONCEPTS & LANDSCAPE SERVICE, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90284 046 ***150.00

Principal Place of Business

1700 S. FIRST STREET
LAKE CITY FL 32025

Mailing Address

1700 S. FIRST STREET
LAKE CITY FL 32025

2. Principal Place of Business

1500 S. First St
Suite, Apt. #, etc.

3. Mailing Address

1500 S. First St
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

LAKE CITY FL

City & State

LAKE CITY FL

4. FEI Number

59-3661837

Applied For

Not Applicable

Zip

32025

Country

Columbia

Zip

32025

Country

Columbia

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIS, NETTIE
1500 S. FIRST STREET
LAKE CITY FL 32025

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 re-registering)

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

TITLE: T
NAME: DAVIS, NETTIE
STREET ADDRESS: 1700 S. FIRST STREET
CITY-ST-ZIP: LAKE CITY FL 32025 ☐ Delete

TITLE: DAVID DAVIS
NAME: DAVID DAVIS
STREET ADDRESS: 1500 S. FIRST STREET
CITY-ST-ZIP: LAKE CITY FL 32025 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: Nettie DAVIS
NAME: Nettie DAVIS
STREET ADDRESS: 1500 S. First St
CITY-ST-ZIP: LAKE CITY FL 32025 ☒ Change ☐ Addition

TITLE: DAVID DAVIS -P
NAME: DAVID DAVIS
STREET ADDRESS: 1500 S. First St
CITY-ST-ZIP: LAKE CITY FL 32025 ☐ Change ☒ Addition

TITLE: GREGORY SWIND -VP
NAME: GREGORY SWIND
STREET ADDRESS: 1500 S. First St
CITY-ST-ZIP: LAKE CITY FL 32025 ☐ Change ☒ Addition

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

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

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
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:

Nettie Davis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/6/01

Date

904-752-1576

Daytime Phone #

CR2E034 (10/00)