2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90343 024 ***150.00

DOCUMENT # P00000078765

1. Entity Name
ROGERS LANDSCAPING, INC.

Principal Place of Business	Mailing Address
1167 13TH STREET, N. JACKSONVILLE FL 32250	1167 13TH STREET, N. JACKSONVILLE FL 32250

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1167 13th st N Jacksonville Beach	1167 13th st N
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jx Bch Fla	City & State: Jx Bch Fla
Zip: 32250 Country: Duval	Zip: 32250 Country: Duval

4. FEI Number: 59-3666453 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROGERS, JAY
1167 13TH STREET, N.
JACKSONVILLE FL 32250

7. Name and Address of New Registered Agent

Name: Jay Rogers
Street Address (P.O. Box Number is Not Acceptable): 1167 13th st N
City: Jacksonville FL Zip Code: 32250

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: Jay M Rogers Jay M Rogers — 4-22-2001
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 / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE: ~~President~~ P,VP,T,S,D,CM NAME: Jay Rogers STREET ADDRESS: 1167 13th st N CITY-ST-ZIP: Jax, Fla 32250	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/00)

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: J M Rogers Jay M Rogers — 4-22-2001 — 904-564-1933
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #