FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 10, 2001 8:00 am P00000086486 DOCUMENT # **Secretary of State** 1. Entity Name BAGLEY ENVIRONMENTAL & PLANTING SERVICES, INC. 07-10-2001 90117 038 ***550.00 Malling Address Principal Place of Business 10680 TULIPTREE COURT 10680 TULIPTREE COURT LEHIGH ACRES FL 33936 LEHIGH ACRES FL 33936 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BAGLEY, DAWN E Street Address (P.O. Box Number is Not Acceptable) 10680 TULIPTREE COURT LEHIGH ACRES FL 33936 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 me of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. President CR2E034 (5/01 TITLE ☐ Delete TITLE NAME NAME 10600 Tuliptree Ct. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change VP ☐ Delete TITLE TITLE NAME Tuliptree / (+. 10680 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE NAME NAME 10680 Tuliptree STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 33936 CITY-ST-ZIP Addition □ Delete TITLE TITLE Morshall C. Bagley NAME NAME 0680 Tuliptree STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3936 CITY-ST-ZIP ☐ Addition ☐ Delete E Bagley 10680 Tul X+ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE TITLE 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 eath; 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

SIGNATURE:

changed-or on an attachment with an address

Daytime Phone #