

FILED
May 27, 2003 8:00 am
Secretary of State

05-01-2003 90368 006 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000092103

1. Entity Name
ISLAND ARBOR SERVICE, INC.



Principal Place of Business
35-43RD AVENUE
VERO BEACH FL 32968-2384

Mailing Address
35-43RD AVENUE
VERO BEACH FL 32968-2384

2. Principal Place of Business
7880-66th AVE
Suite, Apt. #, etc.
VERO BEACH, FL
City & State

3. Mailing Address
7880-66th AVE
Suite, Apt. #, etc.
VERO BEACH, FL
City & State



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1039158

Applied For
☐ Not Applicable

Zip
32967

Country
US

Zip
32967

Country
US

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EGER, TERRY
7880 68TH AVENUE
VERO BEACH FL 32967

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Terry Eger
Signature, typed or printed name of registered agent and titled as applicable.

(NOTE: Registered Agent signature required when reconstituting)

4-26-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
EGER, TERRY A
7880 68TH AVENUE
VERO BEACH FL 32967 ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED TERRY EGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03 772-581-0050
Date Daytime Phone #

Terry Eger

CR2E034 (10/02)