

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
 05-21-2002 90856 033 ***150.00

DOCUMENT # P01000005536

1. Entity Name
ISLAND NATURE & GARDEN COMPANY

Principal Place of Business
 1377 HARRISON POINT TRAIL
 FERNANDINA BCH FL 32034

Mailing Address
 1377 HARRISON POINT TRAIL
 FERNANDINA BCH FL 32034



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
811 SOUTH 8TH ST
 Suite, Apt. #, etc.
8TH

3. Mailing Address
 Suite, Apt. #, etc.

City & State
FERNANDINA BEACH FL

City & State

4. FEI Number
59-3717554

Applied For
 Not Applicable

Zip
32034

Country
USA

Zip

Country

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

ROBERT L. PETERS, P.A.
311 CENTRE ST., SUITE 204
FERNANDINA BCH FL 32034

Name
ROBERT J. MCGINNNESS
 Street Address (P.O. Box Number is Not Acceptable)
1377 HARRISON POINT TRAIL
 City
AMELIA ISLAND, FL Zip Code
32034-5018

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 **ROBERT J. MCGINNNESS** **7/26/02**
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, 2002 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 ☐ Delete
 NAME **D**
 STREET ADDRESS **MCGINNNESS, ROBERT J**
 CITY-ST-ZIP **1377 HARRISON POINT TRAIL FERNANDINA BCH FL 32034**

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **MCGINNNESS, EVELYN M**
 CITY-ST-ZIP **1377 HARRISON POINT TRAIL FERNANDINA BCH FL 32034**

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

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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.

SIGNATURE: **ROBERT J. MCGINNNESS** **7/26/02** **904-261-6980**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)