

7/22/

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 08, 2002 8:00 am
Secretary of State

07-22-2002 90160 018 ***150.00

DOCUMENT # P01000052866

1. Entity Name

WOODY'S LAWN SERVICE INC.

Principal Place of Business

**5314 CORTEZ CT.
CAPE CORAL FL 33904**

Mailing Address

**5314 CORTEZ CT.
CAPE CORAL FL 33904****41041**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

05-1106869

Applied For

Not Applicable

Zip

Country

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

ZALINSKY, CHESTER**5314 CORTEZ CT.
CAPE CORAL FL 33904**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

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 \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. 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
**D
ZALINSKY, CHESTER
5314 CORTEZ CT.
CAPE CORAL FL 33904** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-15-02

Date

239-549-5872

Daytime Phone #

CR2E034 (4/02)

Attachment

Krater & Associates, LLC

1109 Del Prado Blvd. #15

Cape Coral, FL 33990

(941) 574-1040 ♦♦♦ Fax (941) 574-8817

PD 100005286

41041

FLORIDA DEPT OF STATE
UNIFORM BUSINESS REPORT
PO BOX 1500
TALLAHASSEE, FL 32302-1500

July 15, 2000

Enclosed is the completed "second notice" UBR for WOODY'S LAWN SERVICE INC. The first report was never received.

It is interesting to note that I have 3 other clients that did not receive the first report.

Enclosed is a check for \$150 . We respectfully request that you waive the penalty in light of the circumstances.

Thank You



Barry Woodrow EA