

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90175 049 ***150.00

DOCUMENT # P01000099806

1. Entity Name
COUNTYWIDE LAWN CARE & MAINTENANCE INC.

Principal Place of Business
**1839 SHWER TREE WAY
WELLINGTON, FL 33414**

Mailing Address
**1839 SHWER TREE WAY
WELLINGTON, FL 33414**

90151501



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1148116

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

**KIESLING, ROBERT A
4739 N CONGRESS AVE #206
BOYNTON BEACH, FL 33426**

7. Name and Address of New Registered Agent

Name **Ronald A. Young**
Street Address (P.O. Box Number is Not Acceptable)

1839 Shwer Tree Way
City **Wellington** FL Zip Code **33414**

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's signature required when re-instating)

DATE

8/6/03

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

TITLE **D** ☐ Delete
NAME **YOUNG, RONALD A**
STREET ADDRESS **1839 SHWER TREE WAY**
CITY-ST-ZIP **WELLINGTON, FL 33414**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP

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 and typed or printed name of signing officer or director

Date

8/6/03

Daytime Phone #

CR2E034 (10/02)

Attachment

90151501
P0100099806

June 10, 2003

Division of Corporation
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: **Countywide Lawn Care & Maintenance Inc.**
P0100099806

To Whom It May Concern:

As acting director of : Countywide Lawn Care & Maintenance Inc.
I'm writing this letter to let authorized persons of the Florida Dept
of State know that my corporation did not receive the first notice. I
understand that writing this letter personally stating my situation
allows me to file my 2003 Uniform Business Report document #
P0100099806 along with an enclosed check made out to the
Department of State in the amount of \$150.00 fee.

Sorry for the inconvenience, Thank you very much for your time.

If there are any problems please call me at **561-723-3559**.

Sincerely,

Ronald A. Young