

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90107 022 ***550.00

DOCUMENT # P01000110067

1. Entity Name
AMERICAN MULCH PRODUCTS, INC.

Principal Place of Business

**500 N TYMBER CREEK RD
 ORMOND BCH FL 32174**

Mailing Address

**500 N TYMBER CREEK RD
 ORMOND BCH FL 32174**

2. Principal Place of Business

500 N TyMBER Cr. Rd.

3. Mailing Address

PO BOX 731438

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

32173

4. FEI Number

59-3757294

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ZIVITSKI, RICHARD A
 189 MYRTLE JO DR
 ORMOND BCH FL 32174**

7. Name and Address of New Registered Agent

Name **Richard A. Zivitski**

Street Address (P.O. Box Number is Not Acceptable)

1892 Myrtle JO Dr.

City **Ormond Bch**

FL

Zip Code **32174**

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 **Richard A. Zivitski**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9-13-02

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 State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **ZIVITSKI, RICHARD A**
 STREET ADDRESS **1892 MYRTLE JO DRK RD**
 CITY-ST-ZIP **ORMOND BCH FL 32174**

TITLE **D** ☐ Delete
 NAME **TEELON, CHARLES W**
 STREET ADDRESS **3032 S PENINSULA DR**
 CITY-ST-ZIP **DAYTONA BCH SHORES FL 32118**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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:

Richard A. Zivitski
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-13-02

Date

547-3775
 Daytime Phone #

CR2E034 (4/02)