

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 05, 2003 8:00 am**  
**Secretary of State**

09-05-2003 90115 031 \*\*\*150.00

011637 AV

**DOCUMENT # P02000002996**

**1. Entity Name**  
**TRENTALANGE LANDSCAPE, INC.**



**Principal Place of Business**  
**708 GROVELAND AVE.**  
**VENICE FL 34292**

**Mailing Address**  
**708 GROVELAND AVE.**  
**VENICE FL 34292**

**2. Principal Place of Business**

**3. Mailing Address**

**P.O. Box 752**

**Suite, Apt. #, etc.**

**Suite, Apt. #, etc.**

**Venice, FL**

**City & State**

**City & State**

**Zip**

**Country**

**Zip**

**34284**

**Country**

**4. FEI Number**

**03-0382270**

**Applied For**

**Not Applicable**

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

☒ **CHECK HERE IF MAKING CHANGES**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**CORPORATION SERVICE COMPANY**  
**1201 HAYS ST.**  
**TALLAHASSEE FL 32301**

**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**

*James Trentalange*

*James Trentalange*

*9-2-03*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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** **D** ☐ **Delete**  
**NAME** **TRENTALANGE, JAMES C**  
**STREET ADDRESS** **708 GROVELAND AVE.**  
**CITY-ST-ZIP** **VENICE FL 34292**

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

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

*James Trentalange*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**9-2-03**

Date

**941-488-1843**

Daytime Phone #

CR2E034 (4/03)



Attachment# 80144570  
Trentalange Landscape PO2006002996

P.O. Box 752 • Venice, Florida 34284  
(941) 488-1843

*Unique Designs • Waterfalls • Professional Installation*

Florida Dept of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 34314  
September 2, 2003

To whom it may concern:

We did not receive any prior notice of the 2003 Uniform Business Report prior to this notice which we have promptly responded to.

Yours truly,

James Trentalange  
President