

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

06-13-2003 90058 035 ***150.00
FIL# P02000058254
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P02000058254

1. Entity Name

THE LAWN LIZZARDS, INC.



03 JUN 18 PM 2:33

50139516

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2745 Orchid Lane

State, Apt. #, etc.

3. Mailing Address

2745 Orchid Lane

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Kissimmee, FL

City & State

Kissimmee, FL

4. FEI Number

Applied For

Applied For

Not Applicable

Zip

34744

Country

Zip

34744

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name David Portlock

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

7345 Sandlake Road Suite 412

City Orlando

FL

Zip Code
32819

DO NOT WRITE
IN THIS SPACE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Steve Carson, President 2745 Orchid Lane Kissimmee FL 34744	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Laura L. Henes, VP 2745 Orchid Lane Kissimmee, FL 34744	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
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12. I hereby certify that the information furnished with this filing does not qualify for the exemption stated in Section 19.07(3)(a), Florida Statutes. I further certify that the information indicated on this report or supplement thereto 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, trustee, or other person authorized to execute the report as required by Chapter 800, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with or without a home address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/03

CR2E034B (12/02)

6/1/8

Attachment

#90139516

P0200058254

May 9, 2003

To Whom It May Concern:

I am writing this letter regarding my company "Lawn Lizards". It was brought to my attention this past week that I did not receive my annual report, as soon as I realized this I decided to send this letter with payment. I am asking that the late penalty be waived.

I also need to bring to your attention that someone's annual report is on my corporation, I am enclosing copies of this and need it corrected immediately.

Thank you for your prompt attention to this matter.

Sincerely Yours,



Steve Carson,
President
Lawn Lizards Inc.

my corp. # is P0200058254
not P0200058284