

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90102 038 ***150.00

0109674 AV

DOCUMENT # P02000089488

1. Entity Name

A. LAWRENCE SERVICES, INC.



Principal Place of Business

**2507 MOORING'S LN
SARASOTA FL 34231**

Mailing Address

**2507 MOORING'S LN
SARASOTA FL 34231**

2. Principal Place of Business

2507 MOORING'S LN

Suite, Apt. #, etc.

3. Mailing Address

2507 MOORING'S LN

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

266-19-1737

Applied For

☐ Not Applicable

Zip

34231

Country

USA

Zip

34231

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LAWRENCE, ALAN J JR
2507 MOORING'S LN
SARASOTA FL 34231**

7. Name and Address of New Registered Agent

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

**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

TITLE NAME STREET ADDRESS CITY-ST-ZIP
Owner/President Alan H. Lawrence Jr 2507 Mooring's Ln

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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 lines empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2E034 (4/03)

ATTACHMENT

80147813

P02000089488

A.LAWRENCE SERVICES

COMMERCIAL - RESIDENTIAL - MAINTENANCE

ALAN H. LAWRENCE JR.

Memo

To: DEAR SIR

From: A.LAWRENCE

CC: N/A

Date: 9/9/03

Re: FILE FEE

TO WHOM IT MAY CONCERN,

I DID NOT RECEIVE THE NORMAL FILING DOCUMENTS IN JANUARY. I'M NOW FILING AFTER CONSULTING WITH YOUR OFFICE THE REGULAR AMOUNT.

THANK YOU FOR YOUR UNDERSTANDING IN THIS MATTER.

ANY QUESTIONS,

PLEASE ADVISE.

BEST REGARDS.
ALAN H. LAWRENCE Jr.

2507 MOORING'S LANE SARASOTA, FL 34231
OFFICE (941) 921-3367 CELL (941) 809-8567 FAX (941) 921-4030