

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000000402

1. Entity Name

TABOR ENVIRONMENTAL SERVICES, INC.

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90031 030 \*\*\*550.00

Principal Place of Business

Mailing Address

~~302 GOLF BREEZE PKWY~~

PO BOX 777

~~STE 100~~

LOUISVILLE MS 39339

~~GOLF BREEZE FL 32661~~

US

CHANGE

2. Principal Place of Business

3. Mailing Address

7200 Sharp Reef Dr. #7

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Pensacola FL

Zip

Country

Zip

Country

32507

USA

4. FEI Number

64-0835510

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 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.

SIGNATURE

*W. Tabor, Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

September 11, 2000

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, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME D TABOR, BILL  
 STREET ADDRESS ~~302 GOLF BREEZE PKWY~~ 7200 Sharp Reef Dr. #7  
 CITY-ST-ZIP ~~GOLF BREEZE FL~~ Pensacola, FL 32507

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

TITLE ☐ Delete  
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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:

*W. Tabor, Pres.*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

September 11, 2000 662-773-4900  
 Date Daytime Phone #

CR2E034 (5/00)