

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90091 044 ***150.00

0155637 FP

DOCUMENT # P93000001223

1. Entity Name

ADVANTAGE LAWN SERVICE, INC.



Principal Place of Business

**16743 TRAFALGAR ST
LOXAHATCHEE FL 33470
US**

Mailing Address

**16743 TRAFALGAR ST
LOXAHATCHEE FL 33470
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0378551

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ARCHIBALD, MICHAEL
16743 TRAFALGAR ST
LOXAHATCHEE FL 33470**

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
**D ARCHIBALD, MICHAEL
16743 TRAFALGAR ST
LOXAHATCHEE FL 33470** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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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
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CITY-ST-ZIP ☐ Change ☐ Addition

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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)(l), 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 an other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-9-03

Date

561-791-0027

Daytime Phone #

CR2E034 (4/03)

Attachment

80147005
#P93000001223

ADVANTAGE LAWN SERVICE, INC.

16743 Trafalgar Drive West
Loxahatchee, Florida
33470
(561)791-0027

Florida Department of State
Division of Corporations

Dear Administrator,

My name is Mike Archibald, and I am the president and sole officer of my company Advantage Lawn Service. I am filing my UBR late only because I did not receive the first one due earlier this year.

The UBR I did receive now states that I now owe \$550.00.

I am requesting to pay the original amount of \$150.00 to be fair simply because I was not notified and did not receive any correspondence from your division, by mail or otherwise, to be able to file on time.

I have attempted to phone you more than once and only reached a dead end and many long recorded messages.

I also sent e-mails to your help site, and did not get a reply.

Enclosed is my UBR and a check for \$150.00.

If you feel that my request is unfounded, I am available at the above address and phone number. My e-mail address is mikeandjudith@juno.com.

Thank You for your consideration

Michael Archibald
Advantage Lawn Service