

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 12, 2001 8:00 am
Secretary of State

01-12-2001 90002 046 ***150.00

C0002705



DO NOT WRITE IN THIS SPACE

DOCUMENT # P93000063363				<div style="text-align: center;"> FILED Jan 12, 2001 8:00 am Secretary of State 01-12-2001 90002 046 ***150.00 </div>																							
1. Entity Name FURST LAWN CARE, INC.																											
Principal Place of Business 5330 MORGAN HORSE DR N JACKSONVILLE FL 32257		Mailing Address 5330 MORGAN HORSE DR N JACKSONVILLE FL 32257		<div style="text-align: center;"> C0002705 DO NOT WRITE IN THIS SPACE </div>																							
2. Principal Place of Business		3. Mailing Address																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																									
City & State		City & State																									
Zip	Country	Zip	Country	4. FEI Number 59-3200441	<table border="1" style="width:100%;"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	Applied For	Not Applicable																				
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																											
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																								
FURSTELLER, LARRY 5330 MORGAN HORSE DR N JACKSONVILLE FL 32257			Name																								
			Street Address (P.O. Box Number is Not Acceptable)																								
			City																								
			<div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																								
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____																											
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> <small>(See criteria on back)</small>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																							
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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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: <i>Larry Fursteller</i>			1-6-01 904 268-1300																								
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>																								

CR2E034 (10/00)