

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000071780

1. Entity Name

ACTION TREE EXPERTS, INC.

Principal Place of Business

2065 TRADE CENTER WAY
NAPLES FL 34109
US

Mailing Address

2065 TRADE CENTER WAY
NAPLES FL 34109-6244
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAULBARS, EDWARD A
3710 FIELDSTONE BLVD.
#505
NAPLES FL 34109

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

Edward A Kaulbars

6-5-00

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

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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	T	☐ Delete
NAME	KAULBARS, PAULA L	
STREET ADDRESS	3710 FIELDSTONE BLVD, #505	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	S	☐ Delete
NAME	BUDISH, DONA	
STREET ADDRESS	11057 WINDSONG CIR, #201	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	P	☐ Delete
NAME	KAULBARS, EDWARD	
STREET ADDRESS	3710 FIELDSTONE BLVD., #505	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE	V	☒ Delete
NAME	KAULBORS, TRAVIS	
STREET ADDRESS	5801 109TH AVE	
CITY-ST-ZIP	NAPLES FL 34109	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☒ Addition
NAME	VP
STREET ADDRESS	KEVIN KAULBARS
CITY-ST-ZIP	11057 WINDSONG CIR #201
	NAPLES, FL 34109
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:

Edward A Kaulbars

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-5-00

Date

941-597-8387

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90034 035 ***150.00