**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P9500006015  1. Entity Name LUXURIOUS LAWNS & GARDENS, INC.				Mar 21, 2001 8:00 8 Secretary of State 03-21-2001 90026 027 ***150.00	am ;
Principal Plac	ce of Business	Mailing Address			
7154 N. UNIVER STE 125 Tamarac Fl 3		7154 N. UNIVERSITY DR STE 125 TAMARAC FL 33321-4617		935374	
2. Principal F	Place of Business  RANBY LAWE	3. Mailing Address	LANE		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
TEITY & Star	YERS BCL, FL	City & State FT MYERS BC	L, FL	4. FEI Number 65-0549257 Applied Not Applied	d For plicable
3 393	Country LEE	33931	ntry EE	5. Certificate of Status Desired - Section 88.75 Additional Fee Required	al
	6. Name and Address of Current R	egistered Agent	Name	7. Name and Address of New Registered Agent	
5975 #216	MYER, DANIEL L CPA W. SUNRISE BLVD B RISE FL 33313			P.O. Box Number is Not Acceptable)  FL Zip Code	
9. This corporate filling	e named entity submits this statement for the signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible requirement and elects to do so.		red Agent signature required E IS \$150.00 e will be \$550.00	when reinstating)  DATE  10. Election Campaign Financing \$5.00 Miles and Contribution Added to Financing Added to Financing State of Financing Added to Financing State of Financing Sta	
11.	OFFICERS AND D			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BEDELL, ROSEMARIE 7154 NORTH UNIVERSITY DR, STE TAMARAC FL 33321-4617	NA E 125	TLE ME BE REET ADDRESS 17-ST-ZIP	THYERS BCL, FL 33931	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEDELL, ALAN 7154 N UNIVERSITY DR, STE 125 TAMARAC FL-33321-4617-	NA ST	15 <b>1</b> // /	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		st	ME SERECT ADDRESS 7-ST-ZIP	EDELL, AIAN TI RANDY LANE THYERS BEL, FL 33931  Change TO RANDY LANE TI RANDY LANE THYERS BILL, FL 33931	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NA St	· }	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ŞTI	LE ME REET ADDRESS Y-ST-ZIP	☐ Change ☐	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		a di	i	☐ Change ☐	Addition
indicated of the cor	i on this report or supplemental report is tr	rue and accurate and that my sign rered to execute this report as requ	ature shall have the s	ction 119.07(3)(i), Florida Statutes. I further certify that the inform same legal effect as if made under oath; that I am an officer or die , Florida Statutes; and that my name appears in Block 11 or Bloc	rector