

2000 QN Form  
Business  
Report

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 MAY 22 AM 9:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000056502

1. Corporation Name

MR. LAWN CARE, INC.

Principal Place of Business

398 ROSELING CIRCLE  
VENICE FL 34293

Mailing Address

398 ROSELING CIRCLE  
VENICE FL 34293

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1996

4. FEI Number

65-0682342

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIMBALL, LORAIN D  
398 ROSELING CIRCLE  
VENICE FL 34293

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETEPSD  
KIMBALL, LEROY S JR.  
398 ROSELING CIRCLE  
VENICE FL 342931.1 TITLE ☐ Change ☐ Addition

NAME

KIMBALL, LEROY S JR.

1.2 NAME

398 ROSELING CIRCLE

1.3 STREET ADDRESS

VENICE FL 34293

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

VTD

2.1 TITLE ☐ Change ☐ Addition

KIMBALL, LORAIN D

2.2 NAME

398 ROSELING CIRCLE

2.3 STREET ADDRESS

VENICE FL 34293

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

3.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

3.2 NAME

CITY-ST-ZIP

3.3 STREET ADDRESS

TITLE ☐ DELETE

NAME

3.4 CITY-ST-ZIP

STREET ADDRESS

4.1 TITLE ☐ Change ☐ Addition

CITY-ST-ZIP

4.2 NAME

TITLE ☐ DELETE

NAME

4.3 STREET ADDRESS

STREET ADDRESS

4.4 CITY-ST-ZIP

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ AdditionTITLE ☐ DELETE

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

6.1 TITLE ☐ Change ☐ Addition

STREET ADDRESS

6.2 NAME

CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

L. Roy S. Kimball Jr. Pres

5/10/00 CT-860-824-5863

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

L. Roy S. Kimball Jr.

F19-941-493-7206