

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000025539**

1. Entity Name

HALLMARK LAWN SERVICE, INC.**FILED**
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90164 047 ***150.00

Principal Place of Business

13820 SE 39 TER
SUMMERFIELD FL 34491

Mailing Address

P O BOX 1756
BELLVIEW FL 34421

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3443785

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, CHARLIE
13820 SE 39TH TERRACE
SUMMERFIELD, FL 34491

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

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 \$550.00**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**DP**
HALL, CHARLIE G
13820 SE 39 TER
SUMMERFIELD FL 34491☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**V**
HALL, LINDA K
13820 SE 39 TER
SUMMERFIELD FL 34491☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**ST**
HALL, GLADYS
13820 SE 39 TER
SUMMERFIELD FL 34491☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **CHARLIE HALL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**7-29-02 352-245-8448**
Date Daytime Phone #

CR2E034 (4/02)

Attachment
Doc. # P97000025539

To: Florida Dept. Of State
Division of Corporations

From: Hallmark Lawn Service Inc.
P.O. Box 1756
Bellevue, Florida 34421
352-245-8448

To whom it may concern: The corporation did not receive any notice prior to this that the taxes were due. I am enclosing the filing fee of 150.00 dollars that is stated in the pamphlet that the fee will be if you received no prior notice before this.

Charlie Hall
President