

# 2000 UNIFORM BUSINESS REPORT (UBR)

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**DOCUMENT # P97000033434**

1. Entity Name  
**MARC'S "AFFORDABLE" TREE & LANDSCAPE SERVICE, IN**

FILED

00 OCT 23 PM 6:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business      Mailing Address

7997 E. SUNRAY LANE      7997 E. SUNRAY LANE  
FLORAL CITY FL 34436-2010      FLORAL CITY FL 34436-2010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

*7997 E. Sunray Lane*      *7997 E. Sunray Lane*

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

*Floral City Fla*      *Floral City Fla*

Zip      Zip      Country      Country

*34436*      *34436*      *Fla*      *Fla*

4. FEI Number      59-3443934      Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

LANE, ROBERT C JR  
400 TOMPKINS STREET  
INVERNESS FL 34450-4139

7. Name and Address of New Registered Agent

Name      *Robert Lane, C Jr*

Street Address (P.O. Box Number is Not Acceptable)  
*400 Tompkins Street*

*7997 E. Sunray Lane*      *Fla*

City      *Floral*      Inverness      FL      Zip Code      *34450*

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      *Marc Tessier*      DATE

Signature, typed or printed name of registered agent and not applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2000 Min. will be \$750.00**  
**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	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TESSIER, MARC		NAME		
STREET ADDRESS	7997 E. SUNRAY LANE		STREET ADDRESS		
CITY-ST-ZIP	FLORAL CITY FL 34436-2010		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, ROBERT C JR		NAME		
STREET ADDRESS	400 TOMPKINS STREET		STREET ADDRESS		
CITY-ST-ZIP	INVERNESS FL 34450		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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:      *MARC TESSIER*      10/6/00      1863-2149088

**SIGNATURE REQUIRED**      Date      Daytime Phone #

CR2E034 (5/00)

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Oct 10, 2000

ATT. Tyrone

Division of Corporations

We talked last week about the 2000 (UBR) Document that was to be sent to you with payment

As my wife was sick, the papers must of been lost. I am sending a copy of the death certificate and a check for \$150.00. Sorry for any inconvenience.

Thank you,

MARC TESSIER

Marc Tessier