

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 03, 2002 8:00 am**  
**Secretary of State**

09-03-2002 90170 023 \*\*\*158.75

**DOCUMENT # P97000076616**

1. Entity Name  
**BEACON IRRIGATION, INC.**

Principal Place of Business  
**15118 LOXAHATCHEE ROAD  
PARKLAND FL 33076**

Mailing Address  
**15118 LOXAHATCHEE ROAD  
PARKLAND FL 33076**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0779243**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

**PARE, JOSEPH A  
15118 LOXAHATCHEE ROAD  
PARKLAND FL 33076**

## 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 State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **PARE, JOSEPH A**  
STREET ADDRESS **15200 STATE ROAD 7**  
CITY-ST-ZIP **DELRAY BEACH FL 33446**

TITLE **STD** ☐ Delete  
NAME **PARE, JAMES**  
STREET ADDRESS **15200 STATE ROAD 7**  
CITY-ST-ZIP **DELRAY BEACH FL 33446**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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  
STREET ADDRESS  
CITY-ST-ZIP

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

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

CR2E034 (4/02)

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 officer like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7-10-02 561-883-6687**

3220  
DATE 11/01  
\$1226  
/00000318000/

80.00

3220  
DATE 11/01  
\$1226  
/0000032647/

47

3223  
DATE 11/01  
\$100.75  
/0000010000/

00

3226  
DATE 11/01  
\$49.17  
/00000004817/

95/92-2414  
00322LP C05700841LC #9660099137P /00000004817/

Attachment 977928

01/08/01 3218 \$48.17 P910000000000

BEACON IRRIGATION INC.  
1518 LOZMANORCHIE ROAD  
PARULAND, FL 3206

3221  
DATE 11/01  
\$1158.75  
/0000015875/

PAY TO THE ORDER OF DEPARTMENT OF STATE  
ONE THOUSAND SIXTY EIGHT AND 75/100

ALUNION PLANTERS BANK

FOR 2001 BEACON IRRIGATION REPORT

00322LP C05700841LC #9660099137P /0000015875/

BEACON IRRIGATION For 2001 UBR

01/16/01 3221 \$158.75

BEACON IRRIGATION INC.  
1518 LOZMANORCHIE ROAD  
PARULAND, FL 3206

3224  
DATE 11/01  
\$880.54  
/0000088054/

PAY TO THE ORDER OF Mc-Lense Supply  
EIGHT HUNDRED EIGHTY AND 54/100

ALUNION PLANTERS BANK

FOR NICE #8

00322LP C05700841LC #9660099137P /0000088054/

01/11/01 3224 \$880.54

BEACON IRRIGATION INC.  
1518 LOZMANORCHIE ROAD  
PARULAND, FL 3206

3227  
DATE 11/01  
\$225.00  
/0000022500/

PAY TO THE ORDER OF BEACON IRRIGATION  
Two hundred twenty five and 00/100

ALUNION PLANTERS BANK

FOR BMM

00322LP C05700841LC #9660099137P /0000022500/

DOCUMENT # P97000076616

1. Entity Name

BEACON IRRIGATION, INC.

Principal Place of Business

15200 STATE ROAD 7  
DELRAY BEACH FL 33446

Mailing Address

15200 STATE ROAD 7  
DELRAY BEACH FL 33446-9776

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0779243

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PARE, JOSEPH A  
15200 STATE ROAD 7  
DELRAY BEACH FL 33446

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.

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 \$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

TITLE PD  
NAME PARE, JOSEPH A  
STREET ADDRESS 15200 STATE ROAD 7  
CITY-ST-ZIP DELRAY BEACH FL 33446 ☐ Delete

TITLE STD  
NAME PARE, JAMES  
STREET ADDRESS 15200 STATE ROAD 7  
CITY-ST-ZIP DELRAY BEACH FL 33446 ☐ Delete

TITLE  
NAME  
STREET ADDRESS ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE  
NAME ☐ Change ☐ Addition

BEACON IRRIGATION, INC.

561-883-6687

15118 LOXAHATCHEE RD  
PARKLAND, FL 33076

0959

63-4/630

Date 2/25/00

PAY TO THE  
ORDER OF

Florida Department of State

\$

158.75

one hundred fifty eight and 75/100

DOLLARS

NationsBank  
NationsBank, N.A.  
4650 WEST ATLANTIC AVE.  
DELRAY BEACH, FL 33445

FOR 2000 UBR # P97000076616

0000959 0063000047 00161204314

Attachment  
Beacon Irrigation, Inc.  
15118 Loxahatchee Road  
Parkland, FL 33076

PA 7000026616

977928

Ph: 561-883-6687

Fax: 561-883-6422

July 16, 2002

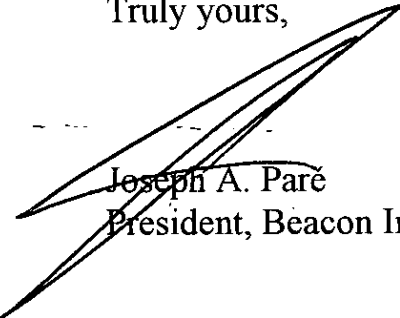
Florida Department of State  
Division of Corporations  
Tallahassee, FL

Dear Sir or Madam:

I wish to certify that the original 2002 UBR filing forms for our companies, Beacon Irrigation and Turtle Pond Services, were not received by us at any time. Enclosed are the current filing forms recently received, and our checks in the amounts of on-time processing fees. Thank you for your consideration. If any additional information is needed, please contact us.

We try to make our filings on a timely basis, and I have included copies of our filing fee checks for the past two years, documenting our payments in February, 2000 and January, 2001.

Truly yours,

  
Joseph A. Pare  
President, Beacon Irrigation

*Attachment*  
Turtle Pond Services, Inc.  
15118 Loxahatchee Road  
Parkland, FL 33076

977928

797000076616

Ph: 561-883-6687

Fax: 561-883-6422

August 26, 2002

Division of Corporations  
UBR Filings  
PO BOX 6327  
Tallahassee, FL 32314

Re: EIN 65-0098774 Turtle Pond Services  
EIN 65-0779243 Beacon Irrigation

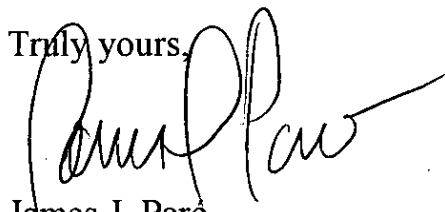
Dear Sir or Madam:

Enclosed are the UBR renewal forms for our two subject companies, Turtle Pond Services and Beacon Irrigation.

As a result of a ridiculous series of mishandling errors in our office over the past few weeks, we previously mailed the checks and forms separately, creating confusion, and we have, finally, received all the materials returned to us by your staff.

Please find the applications and fees enclosed as well as my original cover letter and documentation, addressing the original problem of late filings. Please call if there are any additional questions.

Truly yours,



James J. Pare  
Sec./Treasurer