2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000006854 FILED Jul 26, 2000 8:00 am 1. Entity Name LAWN REFLECTIONS, INC. Secretary of State 07-26-2000 90014 010 ***165.00 Principal Place of Business Mailing Address 4995 KALMIA STREET 4995 KALMIA STREET MIDDLEBURG FL 32068 MIDDLEBURG FL 32068 2. Principal Place of Business 3. Mailing Address Po. Box Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-3509312 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LONGSTRETH, CLARENCE Street Address (P.O. Box Number is Not Acceptable) 4995 KALMIA STREET MIDDLEBURG FL 32068 Zip Code City 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition ☐ Delete TITLE ☐ Change TITLE LONGSTRETH, CLARENCE NAME MAME 4995 KALMIA STREET STREET ADDRESS STREET ADDRESS MIDDLEBURG FL 32068 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Detete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CATY-ST-ZIP ☐ Change Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

SBA SERVICES

P. O. Box 268 Middleburg, Fl. 32068-0268



July 18, 2000

P. O. Box 6327 Tallahassee, Fl. 32314

To Whom it May Concern,

My client, Lawn Reflection, Inc., brought to my attention recently that they had received a second notice for the Annual Corporate Report for 2000. They had not received the original. They had been having a lot of problem with the new mail carrier recently, and complained of their neighbor receiving their mail. Hopefully this matter has been resolved. They would greatly appreciate any waiver of penalties that could considered. This will not happen again in the further.

Thank-You

Kim E. Terry, Owner

Sincerely,

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