

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000016404

1. Entity Name  
NATURALLY GREEN LANDSCAPING, INC.

**FILED**  
**Apr 17, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90106 023 \*\*\*150.00

Principal Place of Business

972 SCANDIA LANE  
ORLANDO FL 32825-6736

Mailing Address

972 SCANDIA LANE  
ORLANDO FL 32825-6736

2. Principal Place of Business

960 Williamsburg DR  
Suite, Apt. #, etc.

3. Mailing Address

960 Williamsburg DR.  
Suite, Apt. #, etc.

City & State

TITUSVILLE

City & State

FLORIDA

4. FEI Number

59-3492825

Applied For

Not Applicable

Zip

32780

Country

USA

Zip

32780

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BONTA, GEORGE  
972 SCANDIA LANE  
ORLANDO FL 32825-6736

Name

Kenneth M. BONTA

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

960 WILLIAMSBURG

City

TITUSVILLE

FL

Zip Code

32780

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

GEORGE BONTA

Kenneth M. BONTA

4/3/2001

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CO	<input type="checkbox"/> Delete
NAME	BONTA, KENNETH	
STREET ADDRESS	972 SCANDIA LANE	
CITY-ST-ZIP	ORLANDO FL 32825-6736	
TITLE	CO	<input checked="" type="checkbox"/> Delete
NAME	BONTA, GEORGE	
STREET ADDRESS	972 SCANDIA LANE	
CITY-ST-ZIP	ORLANDO FL 32825-6736	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Kenneth BONTA

4/3/01

321-385-3818

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)