

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P98000019924

1. Entity Name

Watergarden Hydroponic Farms, Inc.

FILED

00 MAY -8 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

5012 Silo Road

St. Augustine, Fl 32092

2. Principal Place of Business

3. Mailing Address

One Independent Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2600

City & State

City & State

Jacksonville, Florida

Zip

Country

Zip
32202

Country
US

4. FEI Number

59-3498690

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Mary A. Robison, Esq.
One Independent Drive, Suite 2600
Jacksonville, Florida 32202

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

Mary A. Robison

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

5/5/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DESTA D. Suggs
Allen D. Suggs, III
5012 Silo Road
St. Augustine, Florida 32092 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ASVP
Charles F. Irish
8105 Hunters Grove Road
Jacksonville, Florida 32256 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
700003258547--B
-05/19/00--01008--013
****150.00 ****150.00 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Allen D. Suggs, III
2174 Hyde Park Road
Jacksonville, Florida 32210 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Charles F. Irish
8105 Hunters Grove Road
Jacksonville, Florida 32256 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Allen D. Suggs, Jr.
8640 Phillips Hwy., Suite 20
Jacksonville, Florida 32256 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
Allen D. Suggs, Jr.
8640 Phillips Hwy., Suite 20
Jacksonville, Florida 32256 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

Signature and typed or printed name of signing officer or director
Allen D. Suggs, Jr.

4/27/00

Date

(904) 367-0779

Daytime Phone #