

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PA8000021451**

1. Entity Name

Mr. Rooter of Lee Co. Inc.

Principal Place of Business

**2323 Del Prado Blvd #140
Cape Coral FL 33990**

2. Principal Place of Business

1110 Pine Island Road

Suite, Apt. #, etc.

Suite 21

City & State

Cape Coral FL

Zip

33909

Country

Lee

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0818488

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**George S. Garner
2323 Del Prado
Cape Coral FL 33990**

7. Name and Address of New Registered Agent

Name **N/A**

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

6-27-00

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	President	<input type="checkbox"/> Delete
NAME	George S. Garner	
STREET ADDRESS	2323 Del Prado Blvd. Cape Coral FL	
CITY-ST-ZIP	33990	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

Date

Daytime Phone #

6-27-00

00068224

DO NOT WRITE IN THIS SPACE

FILED
Jul 07, 2000 8:00 am
Secretary of State

07-07-2000 90461 027 ***150.00

CR2E034 (9/99)



2323 Delprado Blvd
Suite #7
Cape Coral FL 33990

Attachment
DH 2980002145
DUU68284

To Whom It May Concern:

I am inserting this letter to let you know we never received our 2000 Uniform Business Report (UBR). We recently filed suit against someone who wrote us a bad check and their attorney brought it to our attention. I immediately called your office and asked for a copy to be sent. I waited for 2 weeks and it never arrived so I called again. I received the 2nd copy. I have inserted a check for the \$150.00 to bring us current. Please feel free to call for any further explanations.

Thank you very much for your time and effort,
Sincerely,

Lisa Holsclaw (office manager for Mr. Rooter Plumbing)

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