

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000035588

1. Entity Name

EARTHCARE PROPERTY MAINTENANCE, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90056 043 ***150.00

Principal Place of Business

Mailing Address

2512 WHISPER WAY
TALLAHASSEE FL 32308

P.O. BOX 13371
TALLAHASSEE FL 32317-3371

2. Principal Place of Business

1394 JEFFERY ROAD

3. Mailing Address

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Zip

32312

Country
USA

Country

4. FEI Number

593564513

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARONSON, ASHLEY
2512 WHISPER WAY
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name

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

1394 Jeffery Road

City Tallahassee

FL

Zip Code 32312

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

Ashley Aronson

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

(NOTE: Registered Agent signature required when reinstating)

4-12-00

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

TITLE P
NAME ARONSON, JEFF
STREET ADDRESS 2512 WHISPER WAY
CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Delete

TITLE VP
NAME ARONSON, ASHLEY
STREET ADDRESS 2512 WHISPER WAY
CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Delete

TITLE S
NAME ARONSON, DONALD
STREET ADDRESS 2512 WHISPER WAY
CITY-ST-ZIP TALLAHASSEE FL 32308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1394 Jeffery Road
CITY-ST-ZIP Tallahassee, FL 32312

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1394 Jeffery Road
CITY-ST-ZIP Tallahassee, FL 32312

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Ashley Aronson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-00

Date

(850)668-0985

Daytime Phone #

CR2E034 19/99