

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90458 005 ***150.00

DOCUMENT # P98000044100

1. Entity Name

LAWN MANAGEMENT, INC.

Principal Place of Business

9510 CORALEE AVE. S.E.
ESTERO FL 33928

Mailing Address

9510 CORALEE AVE. S.E.
ESTERO FL 33928

832096



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

18141 RICCARDO CT.

3. Mailing Address

18141 RICCARDO CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. MYERS, FLA.

City & State

FT. MYERS, FLA.

Zip

33912

Country

USA

Zip

33912

Country

USA

4. FEI Number

65-0837594

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GERVAIS, MICHAEL A
9510 CORALEE AVE. S.E.
ESTERO FL 33928

7. Name and Address of New Registered Agent

Name

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

18141 RICCARDO COURT

City

FT. MYERS

FL

Zip Code

33912

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 of Michael A. Gervais)

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, 2002 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 **D** ☐ Delete
NAME **GERVAIS, MICHAEL A**
STREET ADDRESS **9510 CORALEE AVE. S.E.**
CITY-ST-ZIP **ESTERO FL 33928**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **18141 RICCARDO COURT**
CITY-ST-ZIP **FT. MYERS, FLA. 33912**

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

CR2E034 (9/01)

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 of Michael A. Gervais) **Michael A Gervais** **March 25, 02** **941-940 3569**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #