

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000055552

1. Entity Name
EZ LAWN, INC.

Principal Place of Business
18366 JUPITER LANDINGS DR.
JUPITER FL 33458

Mailing Address
18366 JUPITER LANDINGS DR.
JUPITER FL 33458

2. Principal Place of Business
264 Swallowtail Ln.
Suite, Apt. #, etc.

3. Mailing Address
PO Box 65
Suite, Apt. #, etc.

City & State
Jupiter, FL
Zip
33458

Country
USA

City & State
Jupiter, FL
Zip
33458

Country
USA

4. FEI Number 65-0882989

Applied For
Not Applicable

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

TAYLOR, KEITH R ESQ.
530 N. SUNCOAST BLVD.
CRYSTAL RIVER FL 34429

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 *Keith R Taylor*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 4/9/01

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 P/T
NAME ORENDER, KENNETH G
STREET ADDRESS 18366 JUPITER LANDINGS DR.
CITY-ST-ZIP JUPITER FL 33458 ☐ Delete

TITLE P/T
NAME ORENDER, Kenneth G.
STREET ADDRESS 264 Swallowtail Lane
CITY-ST-ZIP Jupiter, FL 33458 ☒ Change ☐ Addition

TITLE VP/S
NAME ORENDER, PATRICIA R
STREET ADDRESS 18366 JUPITER LANDINGS DR.
CITY-ST-ZIP JUPITER FL 33458 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: *Keith R Taylor*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/9/01

Daytime Phone #

FILED
Apr 13, 2001 8:00 am
Secretary of State
04-13-2001 90043 044 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)