

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 23, 2001 8:00 am
Secretary of State**

04-23-2001 90209 025 ***150.00

0119640

DOCUMENT # P98000078806

1. Entity Name

EARTH PRESERVER CHARTER CO.

Principal Place of Business

Mailing Address

**3209 EAGLE AVE
KEY WEST FL 33040
US****3209 EAGLE AVE
KEY WEST FL 33040
US**

2. Principal Place of Business

3. Mailing Address

1724 Bahama Drive**1724 Bahama Drive**

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Key West Florida

City & State

Key West Florida

4. FEI Number

65-0863464

Applied For

Not Applicable

Zip **33040**

Country

USA

Zip

33040

Country

USA5. 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

**BURRIS, MARK A
3209 EAGLE AVE
KEY WEST FL 33040**Name **Burris Mark A.**Street Address (P.O. Box Number is Not Acceptable)
1724 BAHAMA DRIVECity **Key West****FL**Zip Code **33040**

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 **Mark A. Burris****04/17/01**

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, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
PSTD	BURRIS, MARK A	3209 EAGLE AVE	KEY WEST FL 33040	<input type="checkbox"/>	PSTD	Burris Mark A	1724 Bahama Drive	Key West FL 33040	<input checked="" type="checkbox"/>	<input type="checkbox"/>
									(Address change only)	
V	BURRIS, LYNN E	3209 EAGLE AVE	KEY WEST FL 33040	<input type="checkbox"/>	V	Burris Lynn E	1724 Bahama Drive	Key West FL 33040	<input checked="" type="checkbox"/>	<input type="checkbox"/>
									(Address change only)	
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: **Mark A. Burris****04/17/01****(305) 395-1999**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)