

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 06, 2002 8:00 am
Secretary of State

08-06-2002 90131 041 ***150.00

DOCUMENT # P98000082899

1. Entity Name
CLINTMOORE ROAD NURSERIES, INC.

Principal Place of Business
9290 CLINT MOORE ROAD
BOCA RATON FL 33496

Mailing Address
9290 CLINT MOORE ROAD
BOCA RATON FL 33496

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3534936**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

EBERSOLD, RICHARD F
8833 CLINTMOORE RD.
BOCA RATON FL 33496

7. Name and Address of New Registered Agent

Name **RICHARD F. EBERSOLD**
 Street Address (P.O. Box Number is Not Acceptable)
9290 CLINTMOORE RD.
 City **BOCA RATON FL.** **FL** Zip Code **33496**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
 Signature of officer or director or 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **EBERSOLD, RICHARD F**
 STREET ADDRESS **8833 CLINTMOORE RD.**
 CITY-ST-ZIP **BOCA RATON FL 33496**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME **9290 CLINTMOORE ROAD**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
 NAME
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 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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment
Clintmoore Road Nurseries

9290 CLINTMOORE ROAD • BOCA RATON, FLORIDA 33496
(561) 482-1408 • 736-8299

#P98000082899
676459

July 31, 2002

To whom it may concern,

I received your uniform business report about two weeks ago. This is the first form I received. I called my accountant to ask for some information on filing the report. He told me this should have been filed by May. I want you to know I never received any other UBR. I spoke to a representative this morning, he told me to write the letter.

• Thank You

Vickie Paulin

Vickie Paulin
office manager