

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087905

1. Entity Name

M.R. LANDSCAPE MAINTENANCE, INC.

FILED

Apr 17, 2001 8:00 am  
Secretary of State

04-17-2001 90079 033 \*\*\*150.00

Principal Place of Business

5633 NUTMEG AVENUE  
SARASOTA FL 34231

Mailing Address

5633 NUTMEG AVENUE  
SARASOTA FL 34231

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 65-0873474

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

OAKLEY, GARY T  
5633 NUTMEG AVENUE  
SARASOTA FL 34231

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

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 P ☐ Delete  
NAME OAKLEY, GARY T  
STREET ADDRESS 5633 NUTMEG AVENUE  
CITY-ST-ZIP SARASOTA FL 34231

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

TITLE VP ☐ Delete  
NAME KILDUFF, SEAN  
STREET ADDRESS 413 ISLAND CIRCLE  
CITY-ST-ZIP SARASOTA FL 34242

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

TITLE VP ☐ Delete  
NAME SHARLOW, PAUL  
STREET ADDRESS 4581 AMANDA AVE  
CITY-ST-ZIP NORTH PORT FL 34286

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

TITLE VP ☒ Delete  
NAME CASTEEL, JAMES  
STREET ADDRESS 5342 DUNCANWOOD DR  
CITY-ST-ZIP SARASOTA FL 34232

TITLE ☐ Change ☒ Addition  
NAME V.P. FREED, JEFFREY  
STREET ADDRESS 1514 A - 54TH AVE DR. WEST  
CITY-ST-ZIP BRADENTON, FL 34207

TITLE VP ☒ Delete  
NAME COPPOLO, DANIEL  
STREET ADDRESS 1003 MARLIN LAKES CIRCLE  
CITY-ST-ZIP SARASOTA FL 34240

TITLE ☐ Change ☐ Addition  
NAME V.P. LONG, JACKIE  
STREET ADDRESS 1631 82ND CT.  
CITY-ST-ZIP PALM BEACH, FL 34221

TITLE ☐ Delete  
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)