## 2001 UNIFORM BUSINESS REPORT (UBR)

## Feb 27, 2001 8:00 am DOCUMENT # P98000098389 Secretary of State 1. Entity Name 02-27-2001 90337 039 \*\*\*150.00 K & D FULL SERVICE LAWNCARE, INC. Principal Place of Business Mailing Address 1890 ASHCROFT ST NW 1890 ASHCROFT ST NW PALM BAY FL 32907 PALM BAY FL 32907 "经验"的 2. Principal Place of Business 989 Gardenbrook 3. Mailing Address 989 Gardenboot CtSE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3544559 <u>Palm</u> Bal Not Applicable <u> Malm Bal</u> Country Country Zio Zip \$8.75 Additional 5. Certificate of Status Desired 3990 3*900*0 B U50 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -Benneth -Hecce-Street Address (P.O. Box Number is Not Acceptable) REECE. KENNETH M 1890 ASHCROFT ST NW 1000dashar PALM BAY FL 32907 Bay 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 resident rennetr 9. This corporation is eligible to satisfy its intangible $\pm 5$ FILE NOW!!] FEE IS \$150.00 10. Election Campaign Financing \$5,00 May Be Tax filling requirement and elects to do so. Atter MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. (10/00) NO Addition T/D F Change TITLE Deleta Recce. Lenneth M 1999 Gardenbrook Ct REECE, KENNETH M NAME NAME STREET ADDRESS 1890 ASHCROFT ST NW STREET ADDRESS Palm Bay, 72 30909 CITY-ST-20P CITY-ST-ZIP PALM BAY FL 32907 TITLE ☐ Delete TITLE ☐ Change ☐ Addition REECE, DAVID M NAME NAME STREET ADDRESS 1011 CHEROKEE RD SE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP PALM BAY FL 32909 ☐ Change Addition Delete TITLE TITLE NAME \* NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE C Celete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP 13. Thereby 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. 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 by Chapter 607, Florida Statutes. I further certify that the information indicated 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 by Chapter 607, Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director of the section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director of the section 119.07(3)(ii), Florida Statutes. I further certify that I am an officer or director of the section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(iii), Florida Statutes. I further certificate in Section 119.07(3)(iii), Florida Statutes. I further certificate in S Kenneth M. Reece SIGNATURE:

FILED