2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
05-01-2002 91604 041 ***150.00

A034549 AV

DOCUMENT # P98000106190

1. Entity Name
ACACIA LAWN CARE & PRESSURE WASHING, INC.

Principal Place of Business	Mailing Address
415 12TH AVE.NORTH JACKSONVILLE BEACH FL 32250 US	415 12TH AVE.NORTH JACKSONVILLE BEACH FL 32250 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1153 SEBAGO AVE.S.	1153 SEBAGO AVE. S.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ATLANTIC BEACH, FL	City & State: ATLANTIC BEACH, FL
Zip: 32233 Country: US	Zip: 32233 Country: US

4. FEI Number 59-3550803 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

POTTER, MARGARET D
415 12TH AVE.NORTH
JACKSONVILLE BEACH FL 32250

7. Name and Address of New Registered Agent

Name: Same (New Address)
Street Address (P.O. Box Number is Not Acceptable): 1153 SEBAGO AVE. S.
City: ATLANTIC BEACH FL Zip Code: 32233

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 Margaret D. Potter MARGARET D. POTTER 4/18/02
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, 2002 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	PTD POTTER, MICHAEL ~~415 12TH AVE.NORTH~~ → new address ~~JACKSONVILLE BEACH FL 32250~~ →	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME SAME (New Address) 1153 SEBAGO AVE. S. ATLANTIC BEACH FL 32233	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD POTTER, MARGARET D ~~415 12TH AVE.NORTH~~ → new address ~~JACKSONVILLE BEACH FL 32250~~ →	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME SAME (New Address) 1153 Sebago Ave. S. Atlantic Beach FL 32233	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/01)

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: Margaret D. Potter MARGARET D. POTTER DIRECTOR 4/18/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 904-[illegible]