

2000 UNIFORM BUSINESS REPORT (UBR)

8

FILED
Sep 12, 2000 8:00 am
Secretary of State

08-22-2000 90234 005 ***150.00

DOCUMENT # P99000022150

1. Entity Name

GNS LANDSCAPE MAINTENANCE INC.

fr 2

Principal Place of Business

1440 CORAL RIDGE DR.
 CORAL SPRINGS FL 33071

Mailing Address

1440 CORAL RIDGE DR.
 CORAL SPRINGS FL 33071

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

65-0898299

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

SMITH, GREGORY D
11453 N.W. 39CT, #111
CORAL SPRINGS FL 33065

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input type="checkbox"/> Delete
NAME	GREGORY D. SMITH	
STREET ADDRESS	11453 N.W. 39CT. #111	
CITY-ST-ZIP	CORAL SPRINGS, FL 33065	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GREGORY D. SMITH

8/15/00

954-341-5437

Date

Daytime Phone #

CR2E034 (5/00)

Attachment

Doc. # P99000022150

108191

August 15, 2000

Florida Department of State
Division of Corporations

Re: 2000 Uniform Business Report

Upon receipt of the 2000 Uniform Business Report Second Notice, I called the phone number listed, 850-488-9000, and was advised by a gentleman named Andy, to send a check for \$150.00 and a letter stating that I had not received the first notice. Please find attached the UBR form and a check for \$150.00.

Thank you for your understanding and help in this matter.

Sincerely,

GNS Landscape Maintenance, Inc.



Gregory D. Smith