

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

08-04-2002 90164 037 \*\*\*150.00

**DOCUMENT # P99000072330**

1. Entity Name  
**CUTLER'S LAWN CARE, INC.**

Principal Place of Business  
**13803 BLUE LAGOON WAY  
 ORLANDO FL 32828**

Mailing Address  
**13803 BLUE LAGOON WAY  
 ORLANDO FL 32828**

972214



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3594604**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

**BOWEN, ANNE-MARIE L  
 1516 E. HILLCREST STREET, STE 103  
 ORLANDO FL 32803**

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

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	<b>P</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>CUTLER, ROBERT J</b>		NAME		
STREET ADDRESS	<b>13803 BLUE LAGOON WAY</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ORLANDO FL 32828</b>		CITY-ST-ZIP		
TITLE	<b>VPST</b>	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>CUTLER, MARCIA A</b>		NAME		
STREET ADDRESS	<b>13803 BLUE HAGOON WAY</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ORLANDO FL 32828</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *Marcia A. Cutter (VPST)* 7/30/02 407-273-3541  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment  
Doc. # 99000072330  
972214

July 30, 2002

Dear Sis/Ms.:

I am enclosing a check for \$150.00 for our 2002 Uniform Business Report fee. I spoke with your office today to explain that this is the first notice we received regarding this. In the past, we usually receive in April or May. I am not sure for the delay, but neither our Lawyer nor we received any previous notice this year.

Thank you for your consideration in this matter.



Marcia A. Cutler  
Vice President  
Cutler's Lawn Care, Inc.  
FEI# 59-3594604