## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Jul 28, 2000 8:00 am Secretary of State DOCUMENT # **P99000076967** HANSON QUALITY LAWN CARE, INC. 07-28-2000 90146 050 \*\*\*150.00 Mailing Address Principal Place of Business 218 OAK ST. 218 OAK ST. NEPTUNE 8EACH FL 32266 NEPTUNE BEACH FL 32266 AUUbyyyl Mailing Address 2. Principal Place of Busines Marsh Dr DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc Applied For City & State acksonville Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Hanson HANSON, JOHN Street Address (P.O. Box Number is Not Acceptable) 218 OAK ST. **NEPTUNE BEACH FL 32266** 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition President Delete TITLE TITLE NAME John Hanson NAME 3532 Tidal Marsh Drive Jacksonville Beach FL 32250 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITI F NAME NAME STREET ADDRESS 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:

A006445

P99000076967

. ATTACHMENT

3532 Tidal Marsh Drive Jacksonville Beach FL 32250 July 17, 2000

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302 - 1500

To Whom It May Concern:

I am writing in reference to the Uniform Business Report. My company, Hanson Quality Lawn Care, was incorporated in August of 1999. Being, new at owning and operating a business, I am still becoming accustomed to the guidelines and paperwork involved with operating a corporation.

I received a second notice form from the Division of Corporation yesterday and at that point realized that I had never received a first notice. I had moved early this year and thought that a change of address had been filed with your office. I was in the process of moving at the time the first notices were most likely being processed and sent and this may have caused the form not to have reached me.

I am respectfully requesting that you accept my UBR and initial fee and waive the late fee. Enclosed you will find the completed form and check for the filing fee.

I am now better aware of the guidelines for filing the UBR and will, in the future, be able to correspond in a timely manner.

Respectfully,

John S. Hanson

Hanson Quality Lawn Care, INC.