

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000080251

1. Entity Name

JOHN DI TOMASSO LAWNS R US, INC.

FILED

Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90029 030 ***150.00

Principal Place of Business

6385 BRIDGEPORT LANE
LAKE WORTH FL 33463

Mailing Address

6385 BRIDGEPORT LANE
LAKE WORTH FL 33463-6534

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0948341

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVE.
CORAL GABLES FL 33134

Name

JOHN A. DI TOMASSO

Street Address (P.O. Box Number is Not Acceptable)

6385 BRIDGEPORT LANE

City

LAKE WORTH

FL

Zip Code

33463

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 \$150.00
After MAY 1, 2000 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 PSD
NAME DI TOMASSO, JOHN A
STREET ADDRESS 6385 BRIDGEPORT LANE
CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Delete

TITLE PSD
NAME DI TOMASSO, JOHN A
STREET ADDRESS 6385 BRIDGEPORT LANE
CITY-ST-ZIP LAKE WORTH, FL 33463 ☒ Change ☐ Addition

TITLE VTD
NAME DI TOMASSO, ELLEN S
STREET ADDRESS 6385 BRIDGEPORT LANE
CITY-ST-ZIP LAKE WORTH FL 33463 ☐ Delete

TITLE VTD
NAME DI TOMASSO, ELLEN S
STREET ADDRESS 6385 BRIDGEPORT LANE
CITY-ST-ZIP LAKE WORTH, FL 33463 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN A. DI TOMASSO

3/6/00 861-642-5800

Date

Daytime Phone #

CR2E034 (9/99)