

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 18, 2002 8:00 am**  
**Secretary of State**

03-18-2002 90050 050 \*\*\*150.00

**DOCUMENT # P99000081726**

1. Entity Name  
**VAN VOORHIS TREE SERVICE & LANDSCAPING, INC.**

Principal Place of Business

**1152 MORVENWOOD RD.  
 JACKSONVILLE FL 32207**

Mailing Address

**1152 MORVENWOOD RD.  
 JACKSONVILLE FL 32207**

2. Principal Place of Business

**9201 W. Hwy 316**  
 Suite, Apt. #, etc.

3. Mailing Address

**9201 W. Hwy 316**  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

**Reddick FL**

City & State

**Reddick FL**

4. FEI Number **65-0948122**

Applied For  
 Not Applicable

Zip

**32686**

Country

**USA**

Zip

**32686**

Country

**USA**

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

6. Name and Address of Current Registered Agent

**VAN VOORHIS, PAUL R  
 1152 MORVENWOOD RD.  
 JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name

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

**9201 W. Hwy 316**

City

**Reddick**

**FL**

Zip Code

**32686**

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 *Paul R. Van Voorhis*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**3-5-02**

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

TITLE **PD** ☐ Delete  
 NAME **VAN VOORHIS, PAUL R**  
 STREET ADDRESS **1152 MORVENWOOD RD.**  
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE **VD** ☐ Delete  
 NAME **VAN VOORHIS, SHARON A**  
 STREET ADDRESS **1152 MORVENWOOD RD.**  
 CITY-ST-ZIP **JACKSONVILLE FL 32207**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **9201 W. Hwy 316**  
 CITY-ST-ZIP **Reddick FL 32686**

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **9201 W. Hwy 316**  
 CITY-ST-ZIP **Reddick FL 32686**

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ 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: *Sharon A. Van Voorhis* **Sharon A. Van Voorhis** **3502** **591-4987**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Vice President** Date Daytime Phone #

1 CR2E034 (9/01)