

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 15, 2000 8:00 am  
Secretary of State

09-15-2000 90016 025 \*\*\*150.00

DOCUMENT # P99000102414

1. Entity Name

TREASURE COAST TREE, INC.

P

Principal Place of Business

2038 S.W. EMBER CT. ST.  
PORT ST. LUCIE FL 34953

Mailing Address

2038 S.W. EMBER CT.  
PORT ST. LUCIE FL 34953

NOV 10 2000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2038 SW EMBER ST

3. Mailing Address

SAME

Suite, Apt. #, etc.

SAME

City & State

Port ST Lucie

City & State

SAME

4. FEI Number

☒ Applied For  
☐ Not Applicable

Zip  
34953

Country  
US

Zip

SAME

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GIANINO, PETER  
217 EST OCEAN BLVD.  
STUART FL 34994

7. Name and Address of New Registered Agent

Name  
Robert Patterson

Street Address (P.O. Box Number is Not Acceptable)  
2038 SW EMBER ST

PSL FL

City

34953

FL

Zip Code  
34953

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

ROBERT PATTERSON

7-10-00

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D & T PAHERON, ROBERT  
2038 S.W. EMBER CT.  
PORT ST. LUCIE FL 34953

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PATTERSON, ROBERT  
2038 SW EMBER ST  
PSL FL 34953

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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 REQUIRED ROBERT PATTERSON

7-10-00

Date

221-0313

Daytime Phone #

CR2E034 (5/00)

Attachment  
# P99000162414

AC0018476

Upon Receiving this notice I contacted  
Your Administration 1st telephone they told me  
That my IRLC was Filed too Late  
To Be Rescindable For the next 1st  
Deadline now To Send a check for the  
Balance of 150<sup>00</sup>

Thurs