

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90183 027 ***150.00

DOCUMENT # S80594

1. Entity Name
LANDCO, INC.

Principal Place of Business

3200 N. FEDERAL HIGHWAY
128
BOCA RATON FL 33431

Mailing Address

3200 N. FEDERAL HIGHWAY
128
BOCA RATON FL 33431

2. Principal Place of Business

2220 N. DIXIE HWY.
 Suite, Apt. #, etc.

3. Mailing Address

2220 N. DIXIE HWY.
 Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

4. FEI Number

65-0284758

Applied For

Not Applicable

Zip

33431

Country

USA

Zip

33431

Country

USA

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

AEBERSOLD, ROBERT D.
3200 N. FEDERAL HIGHWAY
128
BOCA RATON FL 33431

Name

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

2220 N. DIXIE HWY.

City

BOCA RATON

FL

Zip Code

33431

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 D. Abersold

ROBERT D. AEBERSOLD

1-15-2002

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPT** ☐ Delete
NAME **AEBERSOLD, ROBERT D.**
STREET ADDRESS **3200 N. FEDERAL HWY #128**
CITY-ST-ZIP **BOCA RATON FL**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2220 N. DIXIE HWY.**
CITY-ST-ZIP **BOCA RATON, FL 33431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

Robert D. Abersold
Robert D Abersold

1/15/2002

561 391-5057

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)