

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 07, 2001 08:00 AM**
Secretary of State**DOCUMENT # S97353**1. Entity Name
O'DONNELL LANDSCAPES, INC.

Principal Place of Business

4291 WILLIAMS ROAD

ESTERO

33928

FL

US

Mailing Address

4291 WILLIAMS ROAD

ESTERO

33928

FL

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0301159

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

O'DONNELL, ALBERT
4291 WILLIAMS ROADESTERO,
33928

FL

US

7. Name and Address of New Registered Agent

Name

O'DONNELL ALBERT

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

4291 WILLIAMS ROAD

City
ESTERO,

FL

Zip Code
33928

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 **ALBERT O'DONNELL****03/07/2001**

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, 2001 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	DVP	☐ Delete
NAME	PALLAK, MARK S.	
STREET ADDRESS	4626 SIERRA LN	
CITY-ST-ZIP	BONITA SPRINGS FL 34134	
TITLE	DS	☐ Delete
NAME	O	
STREET ADDRESS	4291 WILLIAMS ROAD	
CITY-ST-ZIP	ESTERO FL	
TITLE	DP	☐ Delete
NAME	O ALBERT S	
STREET ADDRESS	4291 WILLIAMS RD.	
CITY-ST-ZIP	ESTERO FL 33928	
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		
CITY-ST-ZIP		
TITLE	DS	☒ Change ☐ Addition
NAME	O'DONNELL PATRICIA	
STREET ADDRESS	4291 WILLIAMS ROAD	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE	DP	☒ Change ☐ Addition
NAME	O'DONNELL ALBERT S	
STREET ADDRESS	4291 WILLIAMS RD.	
CITY-ST-ZIP	ESTERO FL 33928	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: **PATRICIA O'DONNELL**

DS

03/07/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)