

AMENDMENT

IN RE:

Lykes Bros., Inc., 106 SW County Road 721, Okeechobee, FL 34974, Complainant,

vs

Environmental Innovations, Inc., Respondent. (Unlicensed Dealer Complaint)

**AMOUNT OF AMENDED COMPLAINT: \$2,948.60**

This is an Amendment to and to be made a part of the complaint as styled above and filed with the Florida Department of Agricultural and Consumer Services.

Item (10) Respondent's Mailing Address: 950 Oak Lane, Orange Park, FL 32065. On item (16) the Manner of Purchase was omitted. The method of purchase by Environmental Innovations, Inc. under (Item 16) to purchase the trees was made: after inspection \_\_\_\_; by telephone ; by telegram \_\_\_\_; other  FAX

Lykes Bros., Inc.

BY: Charles P. Taylor

TITLE: EVP  
(Owner or Officer of Corp.)

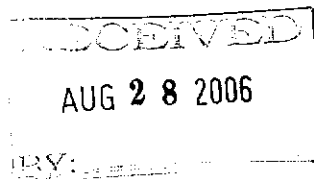
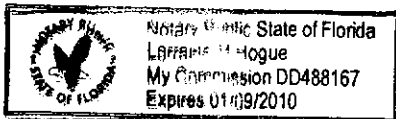
Sworn to and subscribed before me this  
23<sup>rd</sup> day of August, 2006.

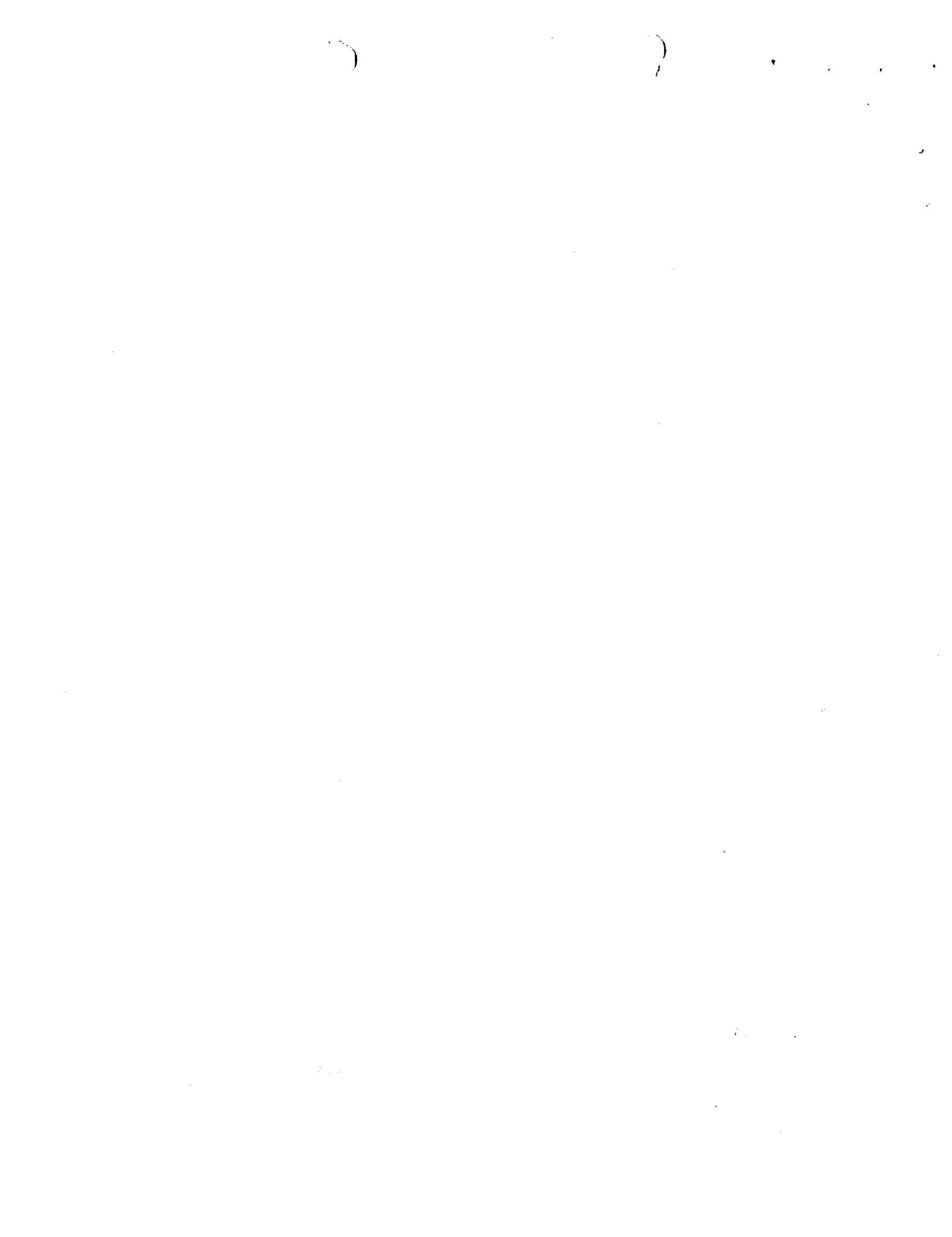
Lorraine M. Hogue  
Notary Public

- Personally Known
- Produced Identification

My Commission Expires: 01/09/2010

Please mail to: Bureau of License and Bond  
Mayo Bldg., M-38  
Tallahassee, FL 32399-0800







AGRICULTURAL PRODUCTS DEALER COMPLAINT FORM

Section 604.21, Florida Statutes

Make check payable and submit forms to:

Florida Department of Agriculture & Consumer Services
Post Office Box 6700
Tallahassee, Florida 32314-6700

Phone (850) 922-0153
Fax (850) 921-8312

CHARLES H. BRONSON
COMMISSIONER

NOTE: Incomplete filings may delay the processing of your complaint. Please retain a copy of this form for your files.
Note: All documents and attachments submitted with this complaint are subject to public review pursuant to Chapter 119, F.S.

1. Type of Complaint:

I am filing this complaint as a

Producer [checked] Agent [ ] Licensed Agricultural Products Dealer [ ] License Number \_\_\_\_\_

2. Legal name of Complainant (Producer, Agent, or Licensed Dealer):

Lukes Bros Inc.
(Individual's name, partners names, corporate name, co-op, etc.)

3. Trade name of Complainant (d/b/a, fictitious name, etc.):

\_\_\_\_\_

4. Federal Employer Identification Number of Complainant:

59-0606439

5. Telephone Number of Complainant:

(863) - 763 - 3041 Ext. \_\_\_\_\_

6. Complete mailing address of Complainant:

Street Address or P.O. Box: 106 S.W. County Rd. 721
City: Okeechobee State: FL Zip: 34974

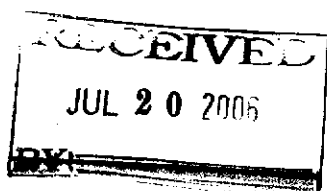
7. Legal name of Respondent (Dealer):

Environmental Innovations, Inc.
(Individual's name, partners names, corporate name, co-op, etc.)

8. Trade name of Respondent (d/b/a, fictitious name, etc.):

\_\_\_\_\_

DO NOT WRITE IN THIS SPACE
Org Code: 4206040000 EO A2
Object Code: 001134
07-02144503-0001
50.00 07/18/2006
Dep#991171



9. Telephone Number of Respondent:

(904) - 483 - 6181 Ext. \_\_\_\_\_

10. Complete mailing address of Respondent:

Street Address or P.O. Box: P.O. Box 1326  
 City: Orange Park State: Fl. Zip: 32067

11. Legal name of Co-Respondent (Surety Company or Financial Institution):

\_\_\_\_\_

12. Complete mailing address of Co-Respondent:

Street Address or P.O. Box: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

13. Transaction(s): Complainants filing a complaint as a producer's agent must also complete Item 15:  
 (Attach additional pages as necessary using same format.)

<u>DATE OF SALE</u>	<u>QUANTITY, PRODUCTS AND PRICE PER UNIT</u>	<u>INVOICE AMOUNT</u>
5/10/06	33 Sabal Palms 60. <sup>00</sup> + tax	2,118.60
"	Delivery Charge 780. <sup>00</sup>	780.00

14. Complaint Total (Minimum Complaint must equal \$500):

\$ 2,898.60

Complaint Filing Fee

\$ 50.00

Grand Total

\$ 2,948.60

**FOR PRODUCER'S AGENT ONLY** (Attach additional pages as necessary using same format.)

15. The producers of agricultural products involved in this complaint are as follows:

- 1. Date of Sale: \_\_\_\_\_ Producer: \_\_\_\_\_  
Producer's Address: \_\_\_\_\_  
Commodity: \_\_\_\_\_ Amount: \_\_\_\_\_
- 2. Date of Sale: \_\_\_\_\_ Producer: \_\_\_\_\_  
Producer's Address: \_\_\_\_\_  
Commodity: \_\_\_\_\_ Amount: \_\_\_\_\_
- 3. Date of Sale: \_\_\_\_\_ Producer: \_\_\_\_\_  
Producer's Address: \_\_\_\_\_  
Commodity: \_\_\_\_\_ Amount: \_\_\_\_\_
- 4. Date of Sale: \_\_\_\_\_ Producer: \_\_\_\_\_  
Producer's Address: \_\_\_\_\_  
Commodity: \_\_\_\_\_ Amount: \_\_\_\_\_
- 5. Date of Sale: \_\_\_\_\_ Producer: \_\_\_\_\_  
Producer's Address: \_\_\_\_\_  
Commodity: \_\_\_\_\_ Amount: \_\_\_\_\_

16. The transaction(s) listed in Item 13 were made upon the conditions and manner as follows:

Terms of Sale:

F.O.B.  Delivered  Other  Explain \_\_\_\_\_

Purchased by Environmental Innovations  
(Respondent, Agent, or Employee)

Manner of Purchase:

After Inspection  By Telephone  By Telegram

Other  Explain \_\_\_\_\_

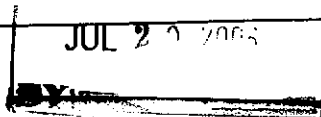
Purchased from Lukes Bros. Inc.  
(Complainant, Agent or Employee)

17. In support of this complaint, attached hereto is the following documentary evidence:

Invoice(s)  Receipt(s)  Manifest

Inspection Certificate  Shipping Order  Telegram

Other  Explain RECEIVED



18. I DECLARE UNDER PENALTY OF PERJURY THAT ALL OF THE INFORMATION PROVIDED IN ANSWER TO QUESTIONS 1-17, AND IN THE EXHIBITS ATTACHED HERETO, IS TRUE AND CORRECT.

I DECLARE THAT: (Select one)


- Complainant, as listed in Item 2, is the producer of the agricultural products listed in Item 13, which were produced in Highland & Glades County(s), Florida and sold to Respondent, as listed in Item 7, on the dates and in the amounts indicated. Respondent is justly indebted to Complainant for the described Florida-grown agricultural products, and the indebtedness results from Respondent's failure to properly make payment and/or accounting as required by Sections 604.15-604.34, FS.
- Complainant, as listed in Item 2, is the agent of the Florida producer(s) listed in Item 15. The agricultural products listed in Item 13 were produced in \_\_\_\_\_ County(s), Florida and sold to Respondent, as listed in Item 7, on the dates and in the amounts indicated. Respondent is justly indebted to Complainant for the described Florida-grown agricultural products, and the indebtedness results from Respondent's failure to properly make payment and/or accounting as required by Sections 604.15-604.34, FS.
- Complainant, as listed in Item 2, is a dealer in agricultural products as defined in Section 604.15(1), FS, and was properly licensed by the Department at the time of the transactions described in Item 13. The agricultural products listed in Item 13 were produced in \_\_\_\_\_ County(s), Florida and sold to Respondent, as listed in Item 7, on the dates and in the amounts indicated. Respondent is justly indebted to Complainant for the described Florida-grown agricultural products, and the indebtedness results from Respondent's failure to properly make payment and/or accounting as required by Sections 604.15-604.34, FS.

Sign Here (The individual signing this complaint must be an owner, partner, or, in the case of a corporation or co-op, an officer of complainant.)

Signature: Michael A. Mircovic

Print Name: MICHAEL A. MIRCOVIC Title: GEN. MGR.

Before me, the undersigned, personally appeared (Owner, Partner or Officer) Michael A. Mircovic, who states that he or she has read and understands the statements in Item 18 of this complaint and that all foregoing items are true and correct.

Sworn to and subscribed before me this 7th day of July, 2006.  
  
(Print, Type or Stamp Commissioned Name & Notary Public)

Lorraine M Hogue  
(Signature of Notary Public)

Personally Known  or Produced Identification  Type of Identification Produced \_\_\_\_\_

My Commission Expires 01/09/2010

Complainant must submit the original and two copies of the complaint form (each bearing original signatures and notarizations) together with three copies of all evidence documenting the sale(s). Complainant must provide a \$50 filing fee for each complaint filed with the Department.