

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J30534

Entity Name: U. S. LAWNS, INC.**Current Principal Place of Business:**980 JOLLY ROAD
SUITE 300
BLUE BELL, PA 19422**Current Mailing Address:**980 JOLLY ROAD
SUITE 300
BLUE BELL, PA 19422 US**FEI Number:** 59-2706954**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ASSISTANT TREASURER
Name KNAUS, KATRIONA
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title DIRECTOR
Name HEROLD, JEFF
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title DIRECTOR
Name FEENAN, JOHN
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title ASSISTANT SECRETARY
Name KUEHN, TOMAS
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title VP
Name FITZPATRICK, MICHAEL
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title SECRETARY
Name GOTTSEGEN, JONATHAN
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title TREASURER
Name FEENAN, JOHN
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title VP
Name FEENAN, JOHN
Address 980 JOLLY ROAD
SUITE 300
City-State-Zip: BLUE BELL PA 19422

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN GOTTSEGEN**SECRETARY****04/06/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name HUTCHESON, KENNETH
Address 980 JOLLY ROAD
 SUITE 300
City-State-Zip: BLUE BELL PA 19422

Title ASSISTANT TREASURER
Name WILKINSON, TIMOTHY
Address 980 JOLLY ROAD
 SUITE 300
City-State-Zip: BLUE BELL PA 19422