

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000028724

**Entity Name:** SPRINGHILL NURSERY OF GAINESVILLE, INC.

**Current Principal Place of Business:**

4155 NW 133RD ST.  
GAINESVILLE, FL 32606

**Current Mailing Address:**

4155 NW 133RD ST.  
GAINESVILLE, FL 32606

**FEI Number:** 59-3713187

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SONTAG, SANDRA H  
4129 NW 133RD ST.  
GAINESVILLE, FL 32606 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 DP  
Name SONTAG, SANDRA H  
Address 4129 NW 133RD ST.  
City-State-Zip: GAINESVILLE FL 32606

Title S  
Name HAUFLER, ERNEST ROBERT  
Address 4155 NW 133RD ST  
City-State-Zip: GAINESVILLE FL 32606

Title VP  
Name BUEL, MARK J  
Address 4155 NW 133RD STREET  
City-State-Zip: GAINESVILLE FL 32606

*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:** SANDRA H. SONTAG

**PRESIDENT**

**01/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date