

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000142807

**Entity Name:** MID-FLORIDA LAWN CARE, INC.

**Current Principal Place of Business:**

1418 ILLINOIS AVE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

1418 ILLINOIS AVE  
ORANGE CITY, FL 32763 US

**FEI Number:** 20-0419775

**Certificate of Status Desired:** No

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

LOWE, MARK IPRES  
1418 ILLINOIS AVE  
ORANGE CITY, FL 32763 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 P  
Name LOWE, MARK  
Address 1418 ILLINOIS AVE  
City-State-Zip: ORANGE CITY FL 32763

*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:** MARK I. LOWE

**PRESIDENT**

**04/13/2015**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date