

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000150509

**FILED
Jan 12, 2016
Secretary of State
CC4311423787**

Entity Name: DANIEL ZOECKLER LAWN CARE INC

Current Principal Place of Business:

892 VILLAGE DR.
ORMOND BEACH, FL 32174

Current Mailing Address:

892 VILLAGE DR.
ORMOND BEACH, FL 32174

FEI Number: 20-0433445

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZOECKLER, DANIEL Y
892 VILLAGE DR
ORMOND BEACH, FL 32174 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 PRES
Name ZOECKLER, DANIEL Y
Address 892 VILLAGE DR.
City-State-Zip: ORMOND BEACH FL 32174

Title VP, TREASURER
Name ZOECKLER, KRISTA C
Address 892 VILLAGE DR
City-State-Zip: ORMOND BEACH FL 32174

Title S
Name CLEARWATER, KARIE S
Address 101 BENT TREE DR
 #85
City-State-Zip: DAYTONA BEACH FL 32114

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: KARIE CLEARWATER

SECRETARY

01/12/2016

Electronic Signature of Signing Officer/Director Detail

Date