## 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. 04/24/2016

SIGNATURE: SHERIDAN STEAD

Electronic Signature of Signing Officer/Director Detail

# FEI Number: 20-8510160

### Name and Address of Current Registered Agent:

STEAD, GRAHAM KMR 2643 WOODWIND HILLS LANE LAKELAND, FL 33812 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

#### **Officer/Director Detail :**

Title	MR	Title	MRS
Name	STEAD, GRAHAM K	Name	STEAD, SHERIDAN
Address	2643 WOODWIND HILLS LANE	Address	2643 WOODWIND HILLS LANE
City-State-Zip:	LAKELAND FL 33812	City-State-Zip:	LAKELAND FL 33812

Certificate of Status Desired: No

Apr 24, 2016 Secretary of State CC3591640279

Date

FILED

Date

**OWNER/DIRECTOR** 

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000093974

Entity Name: G.S.W. SERVICES, INC.

# **Current Principal Place of Business:**

2643 WOODWIND HILLS LANE LAKELAND. FL 33812

# **Current Mailing Address:**

2643 WOODWIND HILLS LANE LAKELAND. FL 33812 US