2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000012621

Entity Name: GROUND WORKS SOLUTIONS, INC.

Current Principal Place of Business:

4759 DRANE FIELD ROAD LAKELAND. FL 33811

Current Mailing Address:

4759 DRANE FIELD ROAD LAKELAND, FL 33811 US

FEI Number: 27-4875234 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONNERY, JOHN CJR 101 E KENNEDY BLVD SUITE 3700 TAMPA, FL 33602 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

FILED Apr 06, 2018

Secretary of State

CC9757783105

Officer/Director Detail:

Title CFO/TREASURER Title VP

Name FINN, BRIAN Name FINN, BRIAN

Address 4759 DRANE FIELD ROAD Address 4759 DRANE FIELD ROAD

City-State-Zip: LAKELAND FL 33811 City-State-Zip: LAKELAND FL 33811

Title PRESIDENT/CEO Title SECRETARY

Name KELECY, RICHARD Name MOODY, ROBERT

Address 4759 DRANE FIELD ROAD Address 4759 DRANE FIELD ROAD

City-State-Zip: LAKELAND FL 33811 City-State-Zip: LAKELAND FL 33811

Title DIRECTOR Title DIRECTOR

NameDARNELL, JAMESNameDOWDEN, WILLIAM L. IIIAddress4759 DRANE FIELD ROADAddress4759 DRANE FIELD ROAD

City-State-Zip: LAKELAND FL 33811 City-State-Zip: LAKELAND FL 33811

Title DIRECTOR Title DIRECTOR

Name KIRTLEY, JOHN F. Name LECK, P. JEFFREY

Address 4759 DRANE FIELD ROAD Address 4759 DRANE FIELD ROAD

City-State-Zip: LAKELAND FL 33811

City-State-Zip: LAKELAND FL 33811

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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: BRIAN FINN VICE PRESIDENT 04/06/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name SHANAHAN, KATHLEEN Address 4759 DRANE FIELD ROAD

City-State-Zip: LAKELAND FL 33811