

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000004067

**Entity Name:** GREEN HERON LAWN CARE INC

**Current Principal Place of Business:**

4035 ALESBURY DRIVE  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

4035 ALESBURY DRIVE  
JACKSONVILLE, FL 32224

**FEI Number:** 47-2767649

**Certificate of Status Desired:** No

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

WALTON, FRANK E  
4035 ALESBURY DRIV E  
JACKSONVILLE, FL 32224 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 WALTON, FRANK E  
Address 4035 ALESBURY DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title V  
Name BETTES, WILLIAM A III  
Address 8357 RED HOLLY LANE  
City-State-Zip: JACKSONVILLE FL 32221

Title TREASURER  
Name WALTON, ALISON TURNER  
Address 4035 ALESBURY DRIVE  
City-State-Zip: JACKSONVILLE FL 32224

Title SECRETARY  
Name BETTES, TAMARA SOBAR  
Address 8357 RED HOLLY LANE  
City-State-Zip: JACKSONVILLE FL 32221

*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:** FRANK E WALTON JR

**PRESIDENT**

**04/11/2019**

Electronic Signature of Signing Officer/Director Detail

Date