

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000190388

**Entity Name:** GIFTS FOR LANDSCAPERS, LLC

**Current Principal Place of Business:**

160 POND CYPRESS ROAD  
SUITE B  
ENGLEWOOD, FL 34292

**Current Mailing Address:**

160 POND CYPRESS ROAD  
SUITE B  
VENICE, FL 34292 US

**FEI Number:** 47-5579914

**Certificate of Status Desired:** No

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

GONZALEZ, JOSEPH P.  
160 POND CYPRESS ROAD  
ENGLEWOOD, FL 34292 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:** JOSEPH GONZALEZ

04/21/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name GONZALEZ, PENELOPE  
Address 160 POND CYPRESS ROAD, SUITE B  
City-State-Zip: VENICE FL 34292

Title AMBR  
Name FISTNER, GEORGETTE  
Address 160 POND CYPRESS ROAD, SUITE B  
City-State-Zip: VENICE FL 34292

Title AMBR  
Name MORROW, DEBRA  
Address 160 POND CYPRESS ROAD, SUITE B  
City-State-Zip: VENICE FL 34292

Title AMBR  
Name LASOTA, PAMELA  
Address 160 POND CYPRESS ROAD, SUITE B  
City-State-Zip: VENICE FL 34292

Title AMBR  
Name GONZALEZ, JOSEPH  
Address 160 POND CYPRESS ROAD  
SUITE B  
City-State-Zip: ENGLEWOOD FL 34292

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAMELA LASOTA

AMBR

04/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date