

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G85350

**Entity Name:** TOM'S SOD SERVICE, INC.

**Current Principal Place of Business:**

11413-49TH ST NORTH  
CLEARWATER, FL 33762

**Current Mailing Address:**

11413 49TH STREET, N.  
CLEARWATER, FL 33762 US

**FEI Number:** 59-2383410

**Certificate of Status Desired:** No

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

SEELEY, DONALD D.  
11413-49 ST, N.  
CLEARWATER, FL 33762 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	DDS	Title	DMS
Name	SEELEY, DONALD D.	Name	SEELEY, DONNA M.
Address	11759 ASHLEY COURT	Address	11759 ASHLEY COURT
City-State-Zip:	SEMINOLE FL 33772	City-State-Zip:	SEMINOLE FL 33772

*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: DONNA SEELEY**

**MM**

**04/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date