

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000138866

Entity Name: BACKYARD DESIGNS, INC.**Current Principal Place of Business:**4265-A ELDRIDGE LOOP
ORANGE PARK, FL 32073**Current Mailing Address:**4265-A ELDRIDGE LOOP
ORANGE PARK, FL 32073 US**FEI Number:** 20-5839097**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOLDER, JOE M
4265-A ELDRIDGE LOOP
ORANGE PARK, FL 32073 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	DP
Name	HOLDER, JOE M
Address	6170 A1A SOUTH, #215
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	DS
Name	HOLDER, DEBORAH F
Address	6170 A1A SOUTH, #215
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	DV
Name	TURNER, MARK S
Address	3915 LAKE CREST TERRACE
City-State-Zip:	MIDDLEBURG FL 32068

Title	DT
Name	TURNER, PAMELA O
Address	3915 LAKE CREST TERRACE
City-State-Zip:	MIDDLEBURG FL 32068

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: PAMELA O TURNER**TREASURER****02/23/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date