

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000095474

**Entity Name:** GREENMASTERS OUTDOOR SERVICES, INC.

**Current Principal Place of Business:**

680 PELL RD  
OSTEEN, FL 32764

**Current Mailing Address:**

PO BOX 5921  
DELTONA, FL 32728

**FEI Number:** 27-3980813

**Certificate of Status Desired:** No

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

SKIPPER, DAWN MICHELLE  
680 PELL RD  
OSTEEN, FL 32764 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 SKIPPER, DAWN MICHELLE  
Address 888 CLOVERLEAF BLVD  
City-State-Zip: DELTONA FL 32725

*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:** DAWN MICHELLE SKIPPER

**OWNER/OPERATOR**

**04/29/2015**

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

\_\_\_\_\_  
Date