

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000098990

**Entity Name:** TURF TEC PROFESSIONAL LANDSCAPE SERVICES, INC.

**FILED**  
**Feb 04, 2016**  
**Secretary of State**  
**CC3707153111**

**Current Principal Place of Business:**

6301 PORTER ROAD  
#12 BLDG E  
SARASOTA, FL 34240

**Current Mailing Address:**

6301 PORTER ROAD  
#12 BLDG E  
SARASOTA, FL 34240

**FEI Number: 81-0830329**

**Certificate of Status Desired: Yes**

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

MOLLOY, MARY  
6301 PORTER ROAD  
#12 BLDG E  
SARASOTA, FL 34240 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 MOLLOY, MARY  
Address 11818 FOREST PARK CIRCLE  
City-State-Zip: LAKEWOOD RANCH FL 34211

Title VP  
Name MOLLOY, STEVEN  
Address 7381 ELLICOTT RD  
City-State-Zip: LOCKPORT NY 14094

Title T  
Name MOLLOY, MICHAEL  
Address 11818 FOREST PARK CIRCLE  
City-State-Zip: LAKEWOOD RANCH FL 34211

Title S  
Name HERETH, LAUREN  
Address 7247 BEAR RIDGE RD  
City-State-Zip: N. TONAWANDA NY 14120

*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: MARY MOLLOY**

**PRESIDENT**

**02/04/2016**

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

\_\_\_\_\_  
Date