

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000025247

**Entity Name:** PLS INSTALLATIONS, INC.

**Current Principal Place of Business:**

19370 S. TAMIAMI TRL.  
#112  
FT. MYERS, FL 33908

**Current Mailing Address:**

19370 S. TAMIAMI TRL.  
#112  
FT. MYERS, FL 33908 US

**FEI Number:** 47-2962941

**Certificate of Status Desired:** No

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

TURNER, DANIEL  
19370 S. TAMIAMI TRL.  
#112  
FT. MYERS, FL 33908 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/D                   | Title           | DIRECTOR              |
| Name            | TURNER, DANIEL        | Name            | TURNER, JASON         |
| Address         | 19370 S. TAMIAMI TRL. | Address         | 19370 S. TAMIAMI TRL. |
| City-State-Zip: | FT. MYERS FL 33908    | City-State-Zip: | FT. MYERS FL 33908    |

*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:** DANIEL TURNER

**P/D**

**02/07/2019**

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

\_\_\_\_\_  
Date