

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000064212

Entity Name: FLORIDA LANDSCAPE CONSULTANTS, INC.**Current Principal Place of Business:**9506 N. TRASK STREET
TAMPA, FL 33624**Current Mailing Address:**9506 N. TRASK STREET
TAMPA, FL 33624 US**FEI Number:** 59-3465062**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LANCASTER, MICHAEL A
20935 AMANDA OAK COURT
LAND O LAKES, FL 34638 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 PRESIDENT, SECRETARY, DIRECTOR
Name LANCASTER, MICHAEL A
Address 17418 BROWN ROAD
City-State-Zip: ODESSA FL 33556

Title DIRECTOR
Name BOHANNON, HERMAN B
Address 11724 PHOENIX CIRCLE
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name BOGMAN, AMY J
Address 13473 DRYSDALE STREET
City-State-Zip: SPRINGHILL FL 34609

Title DIRECTOR
Name ALCAIDE, JUAN C
Address 9250 CHRISTINE LANE
City-State-Zip: SPRINGHILL FL 34608

Title DIRECTOR
Name MACWILLIAM, JAMES A
Address 21845 PANTHER WAY
City-State-Zip: LAND O LAKES FL 34639

Title DIRECTOR
Name EBANKS, THOMAS W
Address 3529 WILLISTON LOOP
City-State-Zip: LAND O LAKES FL 34639

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: MICHAEL A LANCASTER**PRESIDENT****02/10/2017**

Electronic Signature of Signing Officer/Director Detail

Date