

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000086045

**Entity Name:** LEGACY LANDSCAPING SERVICES, LLC

**Current Principal Place of Business:**

310 SE 9TH AVENUE  
CAPE CORAL, FL 33990

**Current Mailing Address:**

P.O. BOX 151397  
CAPE CORAL, FL 33915 US

**FEI Number: 81-2565254**

**Certificate of Status Desired: No**

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

SCHOENFIELD, LOWELL S  
1380 ROYAL PALM SQUARE BOULEVARD  
FORT MYERS, FL 33919 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

**Authorized Person(s) Detail :**

Title MGR  
Name SCHARF, GARY D  
Address P.O. BOX 151397  
City-State-Zip: CAPE CORAL FL 33915

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SCHARF , GARY D**

**MGR**

**03/21/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date