

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000005028

**Entity Name:** YELLOWSTONE LANDSCAPE, INC.

**Current Principal Place of Business:**

3235 N STATE ST  
BUNNELL, FL 32110

**Current Mailing Address:**

PO BOX 849  
BUNNELL, FL 32110 US

**FEI Number: 80-0144209**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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  
Name            PROTLAND, TIMOTHY  
Address        P O BOX 849  
City-State-Zip: BUNNELL FL 32110

Title            VP  
Name            WELCH, PETER  
Address        P O BOX 849  
City-State-Zip: BUNNELL FL 32110

Title            EXECUTIVE VP  
Name            DELLECKER, WILLIAM  
Address        P O BOX 849  
City-State-Zip: BUNNELL FL 32110

Title            DIRECTOR  
Name            PERRY, CHRIS  
Address        3235 N STATE ST  
City-State-Zip: BUNNELL FL 32110

Title            DIRECTOR  
Name            POTTERS, DOUG  
Address        3235 N STATE ST  
City-State-Zip: BUNNELL FL 32110

Title            DIRECTOR  
Name            COMPALL, JOHN  
Address        3235 N STATE ST  
City-State-Zip: BUNNELL FL 32110

Title            DIRECTOR  
Name            THARRINGTON, OWEN  
Address        3235 N STATE ST  
City-State-Zip: BUNNELL FL 32110

*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: PETER WELCH**

**VICE PRESIDENT**

**04/07/2017**

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

\_\_\_\_\_  
Date