## **2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 652943** 

**Entity Name: TURF TECH INCORPORATED** 

**Current Principal Place of Business:** 

2353 ST JOHNS BLUFF RD S. JACKSONVILLE. FL 32246

**Current Mailing Address:** 

2353 ST JOHNS BLUFF RD S. JACKSONVILLE, FL 32246

FEI Number: 59-1993686 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOREAU, GARY RMR 12815 FORT CAROLINE ROAD JACKSONVILLE, FL 32225 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

FILED Jan 28, 2013

**Secretary of State** 

CC8998257421

Officer/Director Detail:

Title P Title 5

NameMOREAU, GARY R.NameMIXON, ANTHONY RMRAddress12815 FORT CAROLINE ROADAddress3459 PEACH DRIVE

City-State-Zip: JACKSONVILLE FL 32225 City-State-Zip: JACKSONVILLE FL 32246

Title V Title T

Name MOREAU, COREY Name MOREAU, ANDY MR

Address 2353 ST JOHNS BLUFF RD.S. Address 12815 FORT CAROLINE ROAD

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32225

Title VP

Name MOREAU, LISA A

Address 2353 ST JOHNS BLUFF RD S. City-State-Zip: JACKSONVILLE FL 32246

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: GARY MOREAU

Electronic Signature of Signing Officer/Director Detail

**PRES** 

01/28/2013

Date