2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# F05000005557

Entity Name: TURF CARE SUPPLY CORP.

Current Principal Place of Business:

360 NORTH CRESCENT DRIVE
SOUTH BUILDING
BEVERLY HILLS, CA 90210

New Principal Place of Business:

50 PEARL ROAD
SUITE 200
BRUNSWICK, OH 44212

Current Mailing Address:

360 NORTH CRESCENT DRIVE
SOUTH BUILDING
BEVERLY HILLS, CA 90210

New Mailing Address:

FEI Number: 20-3239282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DVS	( ) Delete
Name:	KALAWSKI, EVA M	
Address:	360 NORTH CRESCENT DRIVE, SOUTH BUILDING	
City-St-Zip:	BEVERLY HILLS, CA 90210	
Title:	P	( ) Delete
Name:	MILOWITZ, BILL	
Address:	50 PEARL ROAD, SUITE 200	
City-St-Zip:	BRUNSWICK, OH 44212	
Title:	VT	( ) Delete
Name:	JOUBRAN, ROBERT J	
Address:	360 NORTH CRESCENT DRIVE, SOUTH BUILDING	
City-St-Zip:	BEVERLY HILLS, CA 90210	
Title:	V	( ) Delete
Name:	SIGLER, MARY ANN	
Address:	360 NORTH CRESCENT DRIVE, SOUTH BUILDING	
City-St-Zip:	BEVERLY HILLS, CA 90210	
Title:	AS	( ) Delete
Name:	WARD, SALLY A	
Address:	360 NORTH CRESCENT DRIVE, SOUTH BUILDING	
City-St-Zip:	BEVERLY HILLS, CA 90210	
Title:	V	( ) Delete
Name:	ZOLLO, STEPHEN T	
Address:	360 NORTH CRESCENT DRIVE, SOUTH BUILDING	
City-St-Zip:	BEVERLY HILLS, CA 90210	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EVA M. KALAWSKI DVS 04/30/2007

Electronic Signature of Signing Officer or Director — Date