

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002535

FILED
Jan 07, 2009
Secretary of State

Entity Name: HUSTLER TURF EQUIPMENT, INC.

Current Principal Place of Business:

200 SOUTH RIDGE RD.
HESSTON, KS 67062

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 7000
HESSTON, KS 67062

New Mailing Address:

FEI Number: 20-2916428

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: PSD () Delete
Name: MULLET, PAUL
Address: 8506 W. DUTCH AVE.
City-St-Zip: HESSTON, KS 67062

Title: VTD () Delete
Name: MULLET, ROBERT
Address: 24 PARK VIEW RD.
City-St-Zip: HESSTON, KS 67062

Title: D () Delete
Name: KOONTZ, LYLE E
Address: 4708 PORTWEST
City-St-Zip: WICHITA, KS

Title: D () Delete
Name: MILLER, CHUCK
Address: 13208 BARNEGAT LN
City-St-Zip: MC CORDSVILLE, IN 46055

Title: D () Delete
Name: STUTZMAN, DOUG
Address: 5 FAIRWAY
City-St-Zip: HESSTON, KS 67062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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: ROBERT MULLET

VTD

01/07/2009

Electronic Signature of Signing Officer or Director

Date