2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H68194

FILED Mar 30, 2009 Secretary of State

Entity Name: PROFESSIONAL TURF & LANDSCAPE SERVICES, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	UNTY HWY 147 FL 32538 U			
Current M	lailing Addres	s:	New Mailing Addre	255:
	UNTY HWY 147 FL 32538 U			
FEI Number	: 59-2554089	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
21452 US	. K. FULLER HWY 331 N HILL, FL 32567	US		
		ubmits this statement for the p	purpose of changing its register	red office or registered agent, or both,
in the State	e of Fiorida.			
in the State SIGNATU				
	RE:	c Signature of Registered Ag	ent	Date
SIGNATU	RE:Electroni	c Signature of Registered Ag Trust Fund Contribution ().	ent	 Date
SIGNATUI	RE:Electroni	Trust Fund Contribution ().		Date GES TO OFFICERS AND DIRECTORS
SIGNATUI Election Cal OFFICER Title: Name: Address:	RE: Electroni mpaign Financing S AND DIRECT	Trust Fund Contribution (). FORS: Delete ALL K PS 331 N		
Election Car OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	RE: Electroni mpaign Financing S AND DIRECT PS () FULLER, RAND/ 21452 US HWY LAUREL HILL, F	Trust Fund Contribution (). FORS: Delete ALL K PS 331 N L 32567 Delete Y H VT 331 N	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS
SIGNATUI	RE: Electroni mpaign Financing S AND DIRECT PS () FULLER, RAND/ 21452 US HWY LAUREL HILL, F VT () FULLER, TERRY 21452 US HWY LAUREL HILL, F	Trust Fund Contribution (). TORS: Delete ALL K PS 331 N L 32567 Delete Y H VT 331 N L 32567 Delete ALL K SR L 147	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition

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: RANDALL K. FULLER, SR. PS 03/30/2009