

# 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J54237

Entity Name: WESCO TURF, INC.

FILED  
Jul 20, 2009  
Secretary of State

## Current Principal Place of Business:

2101 CANTU CT  
SARASOTA, FL 342326240

## New Principal Place of Business:

## Current Mailing Address:

2101 CANTU CT  
SARASOTA, FL 342326240

## New Mailing Address:

FEI Number: 59-2763187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GAMBLE, WILLIAM J.  
241 SHELL MIDDEN CT.  
OSPREY, FL 34229 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

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: GAMBLE, WILLIAM J III  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: PD ( ) Delete  
Name: GAMBLE, WILLIAM J IV  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: VSD ( ) Delete  
Name: MOORE, LENARD W  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete  
Name: GAMBLE, JOHN R  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: V ( ) Delete  
Name: CONLON, FARRELL  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

Title: V ( ) Delete  
Name: DUGGINS, PATRICK  
Address: 2101 CANTU COURT  
City-St-Zip: SARASOTA, FL 34232

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VSD (X) Change ( ) Addition  
Name: CROFOOT, DAVID F  
Address: 2101 CANTU CT  
City-St-Zip: SARASOTA, FL 34232

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: DAVID CROFOOT

S

07/20/2009

Electronic Signature of Signing Officer or Director

Date