

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

5

**FILED**  
**Jul 31, 2008 8:00 am**  
**Secretary of State**

05-28-2008 90140 013 \*\*\*143.75

**DOCUMENT # L05000006344**

1. Entity Name

GREEN EARTH TURF SERVICE, LLC



Principal Place of Business

PMB 301 9910 ALTERNATE A1A  
SUITE 702  
PALM BEACH GARDENS, FL 33410 US

Mailing Address

PMB 301 9910 ALTERNATE A1A  
SUITE 702  
PALM BEACH GARDENS, FL 33410 US

**30010643**



04292008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-2214897

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KNOX, ROBERT T  
721 HUCKLEBERRY LANE  
NORTH PALM BEACH, FL 33408

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**MANAGING MEMBERS/MANAGERS**

|                |                             |
|----------------|-----------------------------|
| TITLE          | MGRM                        |
| NAME           | RESMONDO, REUBEN K JR       |
| STREET ADDRESS | 1425 SOUTH EAST 23RD STREET |
| CITY-ST-ZIP    | OKEECHOBEE, FL 34974        |
| TITLE          | MGRM                        |
| NAME           | RESMONDO, SHARON A          |
| STREET ADDRESS | 1425 SOUTH EAST 23RD STREET |
| CITY-ST-ZIP    | OKEECHOBEE, FL 34974        |
| TITLE          |                             |
| NAME           |                             |
| STREET ADDRESS |                             |
| CITY-ST-ZIP    |                             |
| TITLE          |                             |
| NAME           |                             |
| STREET ADDRESS |                             |
| CITY-ST-ZIP    |                             |
| TITLE          |                             |
| NAME           |                             |
| STREET ADDRESS |                             |
| CITY-ST-ZIP    |                             |

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

*Reuben K Resmondo Jr*