


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 11, 2008 08:00 A
Secretary of State

DOCUMENT # L05000066390 1. Entity Name SPORTS TURF ATHLETIC FACILITIES & SERVICES, LLC	
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Principal Place of Business 4 MENDOTA LANE FT. LAUDERDALE, FL 33308	Mailing Address 4 MENDOTA LANE FT. LAUDERDALE, FL 33308
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DO NOT WRITE IN THIS SPACE



01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3099249	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent PRESSLEY, RACHEL 4 MENDOTA LANE FT. LAUDERDALE, FL 33308

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRESSLEY, RACHEL 4 MENDOTA LANE FT. LAUDERDALE, FL 33308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLECK, JOHN F 1950 NW 40TH COURT OAKLAND PARK, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/14/08-80022-023 138.75

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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: <i>X Katherine Rachel Pressley</i>	Date: <i>Jan 8, 2008</i>	Daytime Phone #: <i>954.942.8421</i>
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE