

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007554

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: BLOOMINGS LAND AND TURF MANAGEMENT, INC.

## Current Principal Place of Business:

6187 S. MCINTOSH RD  
SARASOTA, FL 34238

## New Principal Place of Business:

6187 S. MCINTOSH RD  
SARASOTA, FL 34238 US

## Current Mailing Address:

5824 BEE RIDGE RD., #165  
SARASOTA, FL 34233

## New Mailing Address:

5824 BEE RIDGE RD., #165  
SARASOTA, FL 34233 US

FEI Number: 59-3621470

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YARISH, ROBERT F  
5824 BEE RIDGE RD., #165  
SARASOTA, FL 34233 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: PD ( ) Delete  
Name: YARISH, ROBERT  
Address: 5824 BEE RIDGE ROAD, #165  
City-St-Zip: SARASOTA, FL 34233

Title: VD ( ) Delete  
Name: LARIMORE, MICAH  
Address: 5824 BEE RIDGE RD #165  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: YARISH, ROBERT  
Address: 5824 BEE RIDGE ROAD, #165  
City-St-Zip: SARASOTA, FL 34233 US

Title: VD (X) Change ( ) Addition  
Name: LARIMORE, MICAH  
Address: 5824 BEE RIDGE RD #165  
City-St-Zip: SARASOTA, FL 34233 US

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 YARISH

PD

02/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date