# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 24, 2009**
**Secretary of State**

DOCUMENT# P03000011402

**Entity Name:** TURFPRO SERVICES, INC.

**Current Principal Place of Business:**

909 N.E. 2ND STREET
BELLE GLADE, FL 33430

**New Principal Place of Business:**

**Current Mailing Address:**

909 N.E. 2ND STREET
BELLE GLADE, FL 33430

**New Mailing Address:**

**FEI Number: 51-0444534** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EVANS, JOHN CALEB
201 SE 6TH ST N
BELLE GLADE, FL 33430 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: PRES ( ) Delete
Name: EVANS, JOHN CALEB
Address: 201 SE 6TH ST N
City-St-Zip: BELLE GLADE, FL 33430

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: JOHN CALEB EVANS PRES 03/24/2009

Electronic Signature of Signing Officer or Director Date