

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026872

FILED
Mar 13, 2008
Secretary of State

Entity Name: GOOSEGRASS ENVIRONMENTAL INC

Current Principal Place of Business:

4967 HAMLIN CIRCLE
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

4967 HAMLIN CIRCLE
MIMS, FL 32754

New Mailing Address:

FEI Number: 20-2376182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSSELIA, SUSAN
4967 HAMLIN CIRCLE
MIMS, FL 32754 US

Name and Address of New Registered Agent:

GOSSELIN, SUSAN
4967 HAMLIN CIRCLE
MIMS, FL 32754 US

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: SUSAN GOSSELIN

03/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: OD () Delete
Name: GOSSELIN, SUSAN E
Address: 3018 PEMBROKE ROAD
City-St-Zip: TITUSVILLE, FL 32796

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OD (X) Change () Addition
Name: GOSSELIN, SUSAN E
Address: 4967 HAMLIN CIRCLE
City-St-Zip: MIMS, FL 32754

Title: SECR () Change (X) Addition
Name: SNODGRASS, NATHAN
Address: 4967 HAMLIN CIRCLE
City-St-Zip: MIMS, FL 32754

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: SUSAN E GOSSELIN

OD

03/13/2008

Electronic Signature of Signing Officer or Director

Date