2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# P05000127229

Entity Name: FAST GRASS INDUSTRIES, INC.

Current Principal Place of Business:

3220 ELIAS CIRCLE
NORTH PORT, FL 34288

New Principal Place of Business:

Current Mailing Address:

2150 TAMIAMI TRAIL, UNIT 12-161
PORT CHARLOTTE, FL 33948

New Mailing Address:

FEI Number: 20-3489581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOCKHART, MELVIN R III
3220 ELIAS CIRCLE
NORTH PORT, FL 34288 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: P ( ) Delete
Name: KOVACH, CHRISTOPHER P
Address: 5646 TROPICAIRE BOULEVARD
City-St-Zip: NORTH PORT, FL 34286

Title: V ( ) Delete
Name: LOCKHART, MELVIN R III
Address: 3503 DELOR AVE
City-St-Zip: NORTH PORT, FL 34286

Title: ST ( ) Delete
Name: LOCKHART, BARBARA M
Address: 3503 DELOR AVENUE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KOVACH, CHRISTOPHER P
Address: 5646 TROPICAIRE BOULEVARD
City-St-Zip: NORTH PORT, FL 34291

Title: V (X) Change ( ) Addition
Name: LOCKHART, MELVIN R III
Address: 3220 ELIAS CIRCLE
City-St-Zip: NORTH PORT, FL 34288 `

Title: ST (X) Change ( ) Addition
Name: LOCKHART, BARBARA M
Address: 3220 ELIAS CIRCLE
City-St-Zip: NORTH PORT, FL 34288

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: BARBARA M. LOCKHART ST 01/29/2009

Electronic Signature of Signing Officer or Director — Date