2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129225

Entity Name: GREENER THE GRASS, INC.

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16495 BUDOWSKY ROAD 3892 W. WHIPPOORWILL STREET

BROOKSVILLE, FL 34614 LECANTO, FL 34461

Current Mailing Address: New Mailing Address:

16495 BUDOWSKY ROAD 3892 W. WHIPPOORWILL STREET

BROOKSVILLE, FL 34614 LECANTO, FL 34461

FEI Number: 20-8308503 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MACMEEKEN, FREDERICK J PRES.
16495 BUDOWSKY ROAD 3892 W. WHIPPOORWILL STREET
BROOKSVILLE, FL 34614 US LECANTO, FL 34461 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: FREDERICK J. MACMEEKEN 03/18/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

16495 BUDOWSKY ROAD

BROOKSVILLE, FL 34614

OFFICERS AND DIRECTORS:

Title:

Name:

Name: Address:

City-St-Zip:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D/P () Delete Title: D/P (X) Change () Addition MACMEEKEN, FREDERICK Name: MACMEEKEN, FREDERICK J 16495 BUDOWSKY ROAD Address: 3892 W. WHIPPOORWILL STREET

City-St-Zip: BROOKSVILLE, FL 34614 City-St-Zip: LECANTO, FL 34461

 Title:
 T () Delete
 Title:
 T (X) Change () Addition

 Name:
 MACMEEKEN, FREDERICK
 Name:
 MACMEEKEN, FREDERICK

 Address:
 16495 BUDOWSKY ROAD
 Address:
 3892 W. WHIPPOORWILL STREET

City-St-Zip: BROOKSVILLE, FL 34614 City-St-Zip: LECANTO, FL 34461

() Delete Title: Title: D//P DMP (X) Change () Addition MACMEEKEN, CAROLYN MACMEEKEN, CAROLYN A Name: Name: 16495 BUDOWSKY ROAD 16495 BUDOWSKY ROAD Address: Address: City-St-Zip: BROOKSVILLE, FL 34614 City-St-Zip: BROOKSVILLE, FL 34614

Title: S () Delete Title: () Change () Addition Name: MACMEEKEN, CAROLYN Name:

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: CAROLYN A. MACMEEKEN VP 03/18/2009