

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2008 8:00 am
Secretary of State

07-22-2008 90006 039 ***150.00

DOCUMENT # P35095
 1. Entity Name
 SUR-LINE TURF, INC.



Principal Place of Business Mailing Address
 19637 GORGAS RD 19637 GORGAS RD
 NORTHPORT, AL 35475 US NORTHPORT, AL 35475 US

00043202



07102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 63-1035160 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPDIRECT AGENTS, INC.
 515 E. PARK AVE.
 TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAMBERT, CHAD M 19637 GORGAS ROAD NORTHPORT, AL 35475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST HEATH, RAYMOND S 19637 GORGAS ROAD NORTHPORT, AL 35475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Tommy L. Pasley 19637 Gorgas Road Northport, AL 35475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raymond S. Heath Date: 7/16/08 Daytime Phone #: (205) 333-1776