

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P97000104445 1. Entity Name AMERICAN TURF EQUIPMENT CO., INC.			
Principal Place of Business 2601 E HENRY AVE B6 TAMPA, FL 33616		Mailing Address 2601 E HENRY AVE B6 TAMPA, FL 33616	
DO NOT WRITE IN THIS SPACE			
04042005 No Chg-P CR2E034 (10/03)			
4. FEI Number 59-3479615			☐ Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BALULIS, EDWARD C SANDLEWOOD DR BLDG 12 #202 WILDWOOD, FL 32785		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 _____ (NOTE: Registered Agent signature required when re-filing) _____ DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BALULIS, EDWARD SANDALWOOD DR, BLDG 12 #202 WILDWOOD, FL 32785		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BALULIS, EDWARD C 12202 SANDALWOOD DR WILDWOOD, FL 34785		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BALULIS, JOSEPH J 826 RED HIBISCUS CT APOPKA, FL 32712		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALULIS, ANTHONY 24104 SANDALWOOD DR WILDWOOD, FL 34785		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u>Edward C Balulis</u> Edward C Balulis Pres. 4/18/05 813 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 236-8800			


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