2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# S60409

Entity Name: EASTWOOD-TUFF TURF OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1615 OKLAHOMA STREET
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

1615 OKLAHOMA ST.
OVIEDO, FL 32765 US

New Mailing Address:

1615 OKLAHOMA STREET
OVIEDO, FL 32765 US

FEI Number: 59-3078654 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EASTWOOD, JASON A
514 OLD MINORCAN TRAIL
NEW SMYRNA BEACH, FL 32168 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: EASTWOOD, JASON
Address: 514 OLD MINORCAN TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP ( ) Delete
Name: EASTWOOD, IAN
Address: 405 MYRTLE STREET
City-St-Zip: SANFORD, FL 32773

Title: VP ( ) Delete
Name: MAINE, SCOTT
Address: 1104 WINGED FOOT CIR W
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T ( ) Delete
Name: EASTWOOD, BOB
Address: 220 WILLIAMS RD
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
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: JASON EASTWOOD PRES 01/19/2009

Electronic Signature of Signing Officer or Director Date