FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(U)

FILED Mar 18 1998 8:00am Secretary of State

S	TUART SOD, INC.	Mailing Address			
25 LINDEN STREET 25 LINDEN STREET					
P.O.BOX 2071 P.O.BOX 2071					
STUART FL 34995-9071 STUART FL 34995-907		STUART FL 34995-9071		DO NOT WRITE IN THIS SPACE	
				3. Date incorporated or Qualified 04/05/1971	
2. Prin	cipal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1320733	Not Applicable
22	e, Apt. #, etc.	Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional Fee Required
	& State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28 Zip	Country		Added to Fees
24	25	29	30	This corporation owes or has paid the e Personal Property Tax due June 30.	Yes No
==1	g. Name and Address of Curren		1901	10. Name and Address of New Registers	
	MEYER, REGINALD O 3483 NARRANGANSETT TERR. STUART FL 34997	ADDRESS CHARGE	→ 3490 83	dress (P.O. Box Number is Not Acceptable) O -MARTINIQUE IRACE	
			84 City	· •	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, wired or printed name of registered agent and tills of phylicable. (NOTE: Registered Agent signature regulated when reinstating) DATE					
Signature, typed or printed name of registered agent and fille it applicable (NOTE 12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PO	DELETE	1.1 TITLE		Change Addition
NAME	MEYER, REGINALD O		1.2 NAME		
STREET A		₹.	1.3 STREET ADDRESS	3490 - MARTINIQUE TRACE	Į.
CITY-ST-			1.4 CITY-ST-ZIP		
TITLE	VO	☐ DELETE	2.1 TITLE		Change Addition
NAME	MEYER,W H		2.2 NAME		·
STREET A			2.3 STREET ADDRESS		
CITY-ST-			2. 4 CITY-ST-ZIP		
TITLE	STD MEYER, MARCUS W	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ACA CAROCHI DI UD		3.2 NAME		
STREET A	DALLA BOLL ODALO PI		3.3 STREET ADDRESS		
CITY-ST-	ZIP FALM BOTT GENTS FL	DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME	ľ	beer it	4. 2 NAME		Chargo Caracida
	20000		1		
STREET A			4.3 STREET ADDRESS		
CITY-ST-	ZIP	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	ì		5.2 NAME		
STREET A	nnerss !		5.3 STREET ADDRESS		
CITY-ST-	`` `		5.4 CITY-ST-ZIP	•	
TITLE	<u>Lv</u>	DELETE	6.1 TITLE		Change Addition
NAME		_	6.2 NAME		-
STREET AL	DORESS		6.3 STREET ADDRESS]
CITY-ST-			6.4 CITY - ST - ZIP		
14. Ib	ereby certify that the information supplied wi	th this filing does not qualify fo		n Section 119.07(3)(i), Florida Statutes. I further	certify that the information

Indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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