

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079703

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: TRIPLE C SOD, INC.

**Current Principal Place of Business:**

3210 BERMUDA ISLES CIRCLE, #1238  
NAPLES, FL 34109

**New Principal Place of Business:**

1760 RANDALL BLVD.  
NAPLES, FL 34120 US

**Current Mailing Address:**

3210 BERMUDA ISLES CIRCLE, #1238  
NAPLES, FL 34109

**New Mailing Address:**

1760 RANDALL BLVD.  
NAPLES, FL 34120 US

FEI Number: 65-1034930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARTER, DOUGLAS A  
3210 BERMUDA ISLES CIRCLE, #1238  
NAPLES, FL 34109 US

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

CARTER, DOUGLAS A  
1760 RANDALL BLVD.  
NAPLES, FL 34120 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: \_\_\_\_\_

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: CARTER, DOUGLAS  
Address: 8210 BERMUDA ISLE CIRCLE #1238  
City-St-Zip: NAPLES, FL 34109

Title: VP ( ) Delete  
Name: CARTER, DIANNE  
Address: 537 SE 4TH STREET  
City-St-Zip: BELLE GLADE, FL 33430

Title: S ( ) Delete  
Name: CARTER, ASHLEY  
Address: 3210 BERMUDA ISLE CIRCLE #1238  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: CARTER, DOUGLAS A  
Address: 1760 RANDALL BLVD.  
City-St-Zip: NAPLES, FL 34120 US

Title: VP (X) Change ( ) Addition  
Name: CARTER, DIANNE  
Address: 537 SE 4TH STREET  
City-St-Zip: BELLE GLADE, FL 33430 US

Title: S (X) Change ( ) Addition  
Name: CARTER, ASHLEY N  
Address: 1760 RANDALL BLVD.  
City-St-Zip: NAPLES, FL 34120 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUGLAS A. CARTER

PT

04/29/2004

Electronic Signature of Signing Officer or Director

Date