2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 90138 049 ****50.00

DOCUMENT # L02000027480

1. Entity Name
FLORIDA SOD SUPPLY, L.L.C.

Principal Place of Business	Mailing Address
~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~	~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~

2. Principal Place of Business	3. Mailing Address
12810 Tamiami Trail N.	12810 Tamiami Trail N.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Naples, FL	City & State: Naples, FL
Zip: 34110 Country: USA	Zip: 34110 Country: USA

03162004 Chg-LLC CR2E083 (10/03)

4. FEI Number: 51-0432041 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCVEY, JAMES L ~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~	Name Street Address (P.O. Box Number is Not Acceptable): 12810 Tamiami Trail N. City: Naples FL Zip Code: 34110

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: _____ JAMES L. McVey _____ 4-7-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM MCVEY, JAMES L ~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 12810 Tamiami Trail N. Naples, FL 34110	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM ROBISON, STEPHEN V ~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 12810 Tamiami Trail N. Naples, FL 34110	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM GATES, TODD E ~~5405 PARK CENTRAL COURT~~ ~~NAPLES, FL 34109~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 12810 Tamiami Trail N. Naples, FL 34110	
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____ Stephen V. Robison 4-7-04 239-593-3777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #