

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 251520

FILED
Apr 27, 2005
Secretary of State

Entity Name: EVERGLADES SOD & LANDSCAPING, INC.

Current Principal Place of Business:

19120 KROME AVE.
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

7667 W SAMPLE ROAD #225
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-0939562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVARGNA, CARRIE S ESQ.
4354 OAKHAVEN LANE
PALM CITY, FL 34990 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: VSD () Delete
Name: PITTS, LISA B
Address: 8122 NW 53 COURT
City-St-Zip: CORAL SPRINGS, FL 33067

Title: PDC () Delete
Name: LAVARGNA, LAURENCE P,
Address: 4354 OAKHAVEN LANE
City-St-Zip: PALM CITY, FL 34990

Title: VTD () Delete
Name: BRANHAM, TONI L,
Address: 3902 SANCTUARY DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: BURLESON, CINDY LEE,
Address: 8309 HICKORY GLEN DRIVE
City-St-Zip: GERMANTOWN, TN 38138

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 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: TONI BRANHAM

VTD

04/27/2005

Electronic Signature of Signing Officer or Director

Date