2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 364974

Entity Name: A-1 SOD INC

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2201 N. CITRUS BLVD. LEESBURG, FL 34748 US

Current Mailing Address: New Mailing Address:

2201 N. CITRUS BLVD. LEESBURG, FL 34748 US

FEI Number: 59-1295291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COTTOM, GLENN EDWARD

2201 N. CITRUS BLVD.

LEESBURG, FL 34748 US

BEESLEY, DEBRA C TREAS

2201 N. CITRUS BLVD.

LEESBURG, FL 34748 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: DEBRA C. BEESLEY 03/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: PD (X) Delete Title: () Change () Addition

 Name:
 COTTOM, GEORGIA P.,
 Name:

 Address:
 2201 N. CITRUS BLVD.
 Address:

 City-St-Zip:
 LEESBURG, FL
 00000,
 City-St-Zip:

Title: SD (X) Delete Title: () Change () Addition

 Name:
 COTTOM, GLENN E,
 Name:

 Address:
 2201 N. CITRUS BLVD.
 Address:

 City-St-Zip:
 LEESBURG, FL
 00000,
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 BEESLEY, DEBRA C.
 Name:

 Address:
 2201 N. CITRUS BLVD.
 Address:

 City-St-Zip:
 LEESBURG, FL
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 COTTOM, GLENN H.
 Name:
 COTTOM, GLENN H

 Address:
 2201 N. CITRUS BLVD.
 Address:
 2201 N. CITRUS BLVD.

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SHOEMAKE, WENDY D
 Name:
 COTTOM, WENDY D

 Address:
 2201 N. CITRUS BLVD.
 Address:
 2201 N. CITRUS BLVD.

 City-St-Zip:
 LEESBURG, FL 34748
 City-St-Zip:
 LEESBURG, FL 34748

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: DEBRA C. BEESLEY TREA 03/23/2009