


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 10, 2007 08:00 AM
Secretary of State**

DOCUMENT # 526735 1. Entity Name YOUNG ACRES SOD, INC.	
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Principal Place of Business 236 NORTH HAVANA RD VENICE, FL 34292	Mailing Address 236 NORTH HAVANA RD VENICE, FL 34292
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07032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1744417	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JOHNSON, WILLIE, A., JR. 300 SHOTGUN LANE OSPREY, FL 34229
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**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when terminating)

DATE

U00000767977
07/10/07-80027-011 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, WILLIE A JR 300 SHOTGUN LANE OSPREY, FL 34229
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST JOHNSON, CHRISTI M 300 SHOTGUN LANE OSPREY, FL 34229
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Willie A. Johnson Jr. 7-2-07

Date

Daytime Phone #

841-488-7542