

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F82215

Entity Name: KIRKLAND SOD, INC.

FILED
Apr 10, 2009
Secretary of State

Current Principal Place of Business:

4328 STATE ROAD #44
NEW SMYRNA BCH, FL 32168

New Principal Place of Business:

Current Mailing Address:

4328 STATE ROAD #44
NEW SMYRNA BCH, FL 32168

New Mailing Address:

FEI Number: 59-2192306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KIRKLAND, FAY L
4328 SR 44
NEW SMYRNA BEACH, FL 32168 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: P () Delete
Name: KIRKLAND, FAY L
Address: 140 SR 44
City-St-Zip: NEW SMYRNA BEACH, FL

Title: S () Delete
Name: SCHWARTZ, GLORIA J
Address: 293 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL

Title: D () Delete
Name: KIRKLAND, ELMER R.
Address: 4328 STATE ROAD #44
City-St-Zip: NEW SMYRNA BEACH, FL

Title: V () Delete
Name: KIRKLAND, WARD A
Address: 275 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL

Title: T () Delete
Name: CARBAJAL, KAREN A.
Address: 305 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KIRKLAND, FAY L
Address: 140 SR 44
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S (X) Change () Addition
Name: SCHWARTZ, GLORIA J
Address: 293 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D (X) Change () Addition
Name: KIRKLAND, ELMER R.
Address: 4328 STATE ROAD #44
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V (X) Change () Addition
Name: KIRKLAND, WARD A
Address: 275 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T (X) Change () Addition
Name: CARBAJAL, KAREN A.
Address: 305 FLORATAM TRAIL
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: FAY L. KIRKLAND

PRES

04/10/2009

Electronic Signature of Signing Officer or Director

Date