P010000 65646

•		
•	(Requestor's Name)	
((Address)	
((Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	` ,	
((Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	

Office Use Only



700022139017

18/11/03--01032--018 **35.00 T

O3 AUG 11 PM 12: 53
SECRETARY OF STATE
AFFORM ASSEE, FLORIDA

Na 42/1.5

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Specialty Sod Growers, Tre (Name of corporation)
DOCUMENT NUMBER: PO100065646
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wiley T. McCall (Name of person)
Specialty Sod Growers, Inc. (Name of firm/company)
P. O. Box 1380 (Address)
Arcadia, FL 34265 (Citý/state and zip code)
For further information concerning this matter, please call:
Margie Lindsey at (941) 637-6007 (Name of person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of
Flacide in order to change its registered office or registered agent or both in the State
of Florida.
of Florida. 1. The name of the corporation: Specialty Sod Growers Inc. 2. The principal office address: 46470 For a hora Rd
2. The principal office address: 46470 Farabee Rd
Punta Gorda, F1 33982
3. The mailing address (if different): P.o. Box 1380
Arcadia, FL 34265
4. Date of incorporation/qualification: 07/02/01 Document number: P0100065646
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Corporation Service Company
1201 Hays STreet
Tallahassee, FL 32301-2525
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Nancy J. Mc Call
46 470 Farabee Rd (P.O. Box or personal mailbox NOT acceptable)
Punta Gorda, FL 33982
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board by the corporation has been notified in writing of the change.
(Signature of an officer, Chairman or vice chairman of the board) WILEY T. MS CALL PRESIDENT (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent) (Date)
If signing on behalf of an entity: NANCY I MECall. Secretary
(Typed or Printed Name) (Capacity) ***FILING FEE: \$35.00 ***
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314