2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P03000000839

Entity Name: ALLEN'S SOD SERVICE, INC.

Current Principal Place of Business:

16135 SE 36TH AVE.
SUMMERFIELD, FL 34491 US

New Principal Place of Business:

13121 S. US HWY 441
BELLEWVIEW, FL 34420 US

Current Mailing Address:

P.O. BOX 1420
BELLEVIEW, FL 34421 US

New Mailing Address:

FEI Number: 41-2073294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEEKLEY, MATTHEW A
7495 SE 105TH PLACE
BELLEVIEW, FL 34420 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: PVT ( ) Delete
Name: WEEKLEY, MATTHEW A
Address: 7495 SE 105TH PLACE
City-St-Zip: BELLEVIEW, FL 34420 US

Title: SEC ( ) Delete
Name: WEEKLEY, ANITA R
Address: 8178 SE 147TH PLACE
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: VP ( ) Delete
Name: WEEKLEY, SUZANN M
Address: 7495 SE 105TH PL
City-St-Zip: BELLEVIEW, FL 34420 US

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:

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: MATTHEW A. WEEKLEY PVT 04/28/2009
Electronic Signature of Signing Officer or Director Date