2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033061

Entity Name: HAVANA SOD & PALLET, INC.

FILED Apr 06, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cullent Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess

2926 SALEM ROAD HAVANA, FL 32333 US

Current Mailing Address: New Mailing Address:

1520 KILLEARN CENTER BLVD 1624 VILLAGE SQ BLVD

SUITE 200 SUITE 101
TALLAHASSEE, FL 32309 US TALLAHASSEE, FL 32309 US

FEI Number: 71-0938726 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

RUDE, C. EDWIN JR.

322 MCDANIEL STREET
TALLAHASSEE, FL 32303 US

RUDE, C. EDWIN JR.

211 EAST CALL STREET
TALLAHASSEE, FL 32301 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: C. EDWIN RUDE 04/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHAI () Delete Title: CHAI (X) Change () Addition Name: BELL, JOHN T Name: BELL, JOHN T

 Name:
 BELL, JOHN T
 Name:
 BELL, JOHN T

 Address:
 1520 KILLEARN CENTER BLVD, STE 200
 Address:
 1624 VILLAGE SQ BLVD, STE 101

 City-St-Zip:
 TALLAHASSEE, FL 32309 US
 City-St-Zip:
 TALLAHASSEE, FL 32309 US

Title: VCHA () Delete Title: () Change () Addition

 Name:
 SIMPSON, GARY
 Name:

 Address:
 2926 SALEM ROAD
 Address:

 City-St-Zip:
 HAVANA, FL 32333 US
 City-St-Zip:

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change () Addition}$

Name: BELL, KATHRYN G Name: BELL, KATHRYN G

Address: 1520 KILLEARN CENTER BLVD, STE 200 Address: 1624 VILLAGE SQ BLVD, STE 101
City-St-Zip: TALLAHASSEE, FL 32309 US City-St-Zip: TALLAHASSEE, FL 32309 US

Title: () Delete Title: (X) Change () Addition BELL, KATHRYN G BELL, KATHRYN G Name: Name: Address: 1520 KILLEARN CENTER BLVD, STE 200 Address: 1624 VILLAGE SQ BLVD, STE 101 City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32309 TALLAHASSEE, FL 32309

Title: P () Delete Title: () Change () Addition

 Name:
 SIMPSON, JÀMES L
 Name:

 Address:
 2926 SALEM ROAD
 Address:

 City-St-Zip:
 HAVANA, FL 32333 US
 City-St-Zip:

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

 Name:
 SIMPSON, GERI
 Name:

 Address:
 2926 SALEM ROAD
 Address:

 City-St-Zip:
 HAVANA, FL 32333 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN T. BELL CHAI 04/06/2006