2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 15, 2005
Secretary of State

DOCUMENT# P04000154298

Entity Name: SOD RANGERS LAWN MAINTENANCE, INC.

Current Principal Place of Business:

809 W. 4TH STREET
RIVIERA BEACH, FL 33404

New Principal Place of Business:

405 NE 13TH AVENUE
BOYNTON BEACH, FL 33435

Current Mailing Address:

809 W. 4TH STREET
RIVIERA BEACH, FL 33404

New Mailing Address:

PO BOX 267
BOYNTON BEACH, FL 334250267

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLONS, MONIQUE D
809 W. 4TH STREET
RIVIERA, FL 33404 US

Name and Address of New Registered Agent:

WRIGHT, NORMAN N
405 NE 13TH AVENUE
BOYNTON BEACH, FL 33435 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: NORMAN N. WRIGHT 11/15/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WELLONS, MAURICE B SR.
Address: 809 W. 4TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VP (X) Delete
Name: WELLONS, MONIQUE D
Address: 809 W. 4TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition
Name: WRIGHT, NORMAN N
Address: 405 NE 13TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NORMAN N. WRIGHT P 11/15/2005
Electronic Signature of Signing Officer or Director Date