

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000014478

FILED
Apr 12, 2011
Secretary of State

Entity Name: SOD SERVICE OF JAX INC.

Current Principal Place of Business:

8963 103RD STREET
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

8719 BEAVER STREET
JACKSONVILLE, FL 32220 US

New Mailing Address:

FEI Number: 26-1986267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAPPS, APRIL
8719 W. BEAVER STREET
JACKSONVILLE, FL 32220 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: CAPPS, JOANN
Address: 8719 BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: TRES
Name: CAPPS, JOANN
Address: 8719 BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: DIR
Name: CAPPS, JOANN
Address: 8719 BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32220 US

Title: DIR
Name: CAPPS, APRIL
Address: 8719 BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32220 US

I hereby 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 all other like empowered.

SIGNATURE: JOANN CAPPS

PRES

04/12/2011

Electronic Signature of Signing Officer or Director

Date