2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000047465

Entity Name: SOD FARMS, INC.

FILED Apr 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P O BOX 700103

ST. CLOUD, FL 347700103

Current Mailing Address: New Mailing Address:

P O BOX 700103

ST. CLOUD, FL 347700103

FEI Number: 65-0419062 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CARD, STEVE CARD, STEVE 2711 HOLIDAY WOODS DR 2932 ANNALEE ROAD

KISSIMMEE, FL 34744 US ST. CLOUD, FL 34771 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: STEVE CARD 04/28/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 CARD, STEVE
 Name:
 CARD, STEVE

 Address:
 2711 HOLIDAY WOODS DR.
 Address:
 2932 ANNALEE ROAD

 City-St-Zip:
 KISSIMMEE, FL 34744
 City-St-Zip:
 ST. CLOUD, FL 34771

Title: D () Delete Title: () Change () Addition

 Name:
 HOLLEY, DANNIE
 Name:

 Address:
 595 SKYWIND COURT
 Address:

 City-St-Zip:
 ST. CLOUD, FL 34771
 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: STEVE CARD PRES 04/28/2004