2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P94000066622

1. Entity Name

SOUTHEAST AG & TURF, INC.



FILED Jul 14, 2004 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

11422 CYPRESS BAY ST CLERMONT, FL 34711

P.O. BOX 121422 CLERMONT, FL 34712-1422



07022004 DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3262978 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

MEEKER, DWIGHT S 11422 CYPRESS BAY ST CLERMONT, FL 34711

SIGNATURE:

DO NOT WRITE IN THIS SPACE

,				
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
Signature, typod or printed name of registered agent and tale # stipplicable. (NOTE: Registered Agent agrature required when reinstating) DATE				
, , , , , , , , , , , , , , , , , , , ,		9. Election Campaign Fina Trust Fund Contribution.	+	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
16.	OFFICERS AND DIRE	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS MEEKER, DWIGHT S 11422 CYPRESS BAY ST CLERMONT, FL 34711			U00000166245 U7/14/04-80008-024 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT CREECH, BUFORD J N. STATE ROAD 561 CLERMONT, FL 34711		_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				