

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097712

FILED
Aug 31, 2004
Secretary of State

Entity Name: HAYNES SOD, INC.

Current Principal Place of Business:

800 SW 11 AVE
OKEECHOBEE, FL 34974

New Principal Place of Business:

Current Mailing Address:

800 SW 11 AVE
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 65-0640249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDEN, NOVICE
2506 DELAWARE AVENUE
FT. PIERCE, FL 34947 US

Name and Address of New Registered Agent:

HAYNES, CHARLENE
800 SW 11TH AVE
FT. PIERCE, FL 34974 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: CHARLENE HAYNES

08/31/2004

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: HAYNES, PAUL E
Address: 403 NE 5TH ST
City-St-Zip: OKEECHOBEE, FL

Title: ST () Delete
Name: HAYNES, CHARLENE
Address: 403 NE 5TH ST
City-St-Zip: OKEECHOBEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAYNES, PAUL E
Address: 800 SW 11TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: ST (X) Change () Addition
Name: HAYNES, CHARLENE
Address: 800 SW 11TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

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: CHARLENE HAYNES

ST

08/31/2004

Electronic Signature of Signing Officer or Director

Date