

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000079358

Entity Name: SOD BUSTERS, INC.

FILED
Jan 22, 2004
Secretary of State

Current Principal Place of Business:

21225 CORNTY RD. 455
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

2300 ROBERT D RD
MOUNT DORA, FL 32757 US

New Mailing Address:

FEI Number: 59-3467624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, BONNIE J
21225 COUNTRY ROAD 455
CLERMONT, FL 34711

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEASLEY, GEORGE
Address: 2300 ROBERT D RD
City-St-Zip: MOUNT DORA, FL 32757

Title: VP () Delete
Name: BEASLEY, BONNIE
Address: 2300 ROBERT D RD
City-St-Zip: MOUNT DORA, FL 32757

Title: E () Delete
Name: BEASLEY, GEORGE B JR.
Address: 21225 COUNTRY RD. 455
City-St-Zip: CLERMONT, FL 34711

Title: E () Delete
Name: BEASLEY, BLAIR S
Address: 2577 WASHINGTON RD.
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: BONNIE J BEASLEY

VP

01/22/2004

Electronic Signature of Signing Officer or Director

Date