2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2004
Secretary of State

DOCUMENT# P98000032015

Entity Name: J & M SOD, INC.

Current Principal Place of Business:

3110 S.E. SLATER STREET
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 146
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 65-0889974 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RASTRELLI, JEFF
1036 S.W. 29TH STREET
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

RASTRELLI, JEFF
5904 SW QUAIL HOLLOW STREET
PALM CITY, FL 34990 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: 04/15/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: RASTRELLI, JEFF
Address: 1036 S.W. 29TH STREET
City-St-Zip: PALM CITY, FL 34990

Title: V ( ) Delete
Name: HORSTMANN, MARK W
Address: 983 SW 29TH ST
City-St-Zip: PALM CITY, FL 34990

Title: ST ( ) Delete
Name: HORSTMADN, SANDRA F
Address: 983 SW 29TH ST
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change ( ) Addition
Name: RASTRELLI, JEFF
Address: 5904 SW QUAIL HOLLOW STREET
City-St-Zip: PALM CITY, FL 34990

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

Title: ST (X) Change ( ) Addition
Name: HORSTMANN, SANDRA F
Address: 983 SW 29TH ST
City-St-Zip: PALM CITY, FL 34990

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: SANDRA F. HORSTMANN ST 04/15/2004
Electronic Signature of Signing Officer or Director — Date