

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000071680

Entity Name: BEST FLORIDA SOD, INC.

FILED  
Apr 12, 2004  
Secretary of State

## Current Principal Place of Business:

824 EAST UNIVERSITY AVE.  
GAINESVILLE, FL 32601

## New Principal Place of Business:

20510 N.E. SR 26  
EARLETON, FL 32631

## Current Mailing Address:

P.O. BOX 1246  
GAINESVILLE, FL 32602

## New Mailing Address:

20510 N.E. SR 26  
EARLETON, FL 32631

FEI Number: 59-3601358

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIDSKY, HOWARD  
824 EAST UNIVERSITY AVE.  
GAINESVILLE, FL 32601

## Name and Address of New Registered Agent:

JENNINGS, MARY  
824 EAST UNIVERSITY AVE.  
GAINESVILLE, FL 32601

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: MARY JENNINGS

04/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LIDSKY, HOWARD  
Address: 2446 NW 37TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete  
Name: KRUGMAN-KADI, EILON  
Address: 324 E UNIVERSITY AVE  
City-St-Zip: GAINESVILLE, FL 32601

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARAD, EILAM  
Address: 20510 N.E. SR 26  
City-St-Zip: EARLETON, FL 32631

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: EILON KRUGMAN-KADI

T

04/12/2004

Electronic Signature of Signing Officer or Director

Date