2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003
Secretary of State

DOCUMENT# P99000071680

Entity Name: BEST FLORIDA SOD, INC.

Current Principal Place of Business:

824 EAST UNIVERSITY AVE.
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1246
GAINESVILLE, FL 32602

New Mailing Address:

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:

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: 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: ( ) 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: EILON KRUGMAN-KADI T 04/18/2003

Electronic Signature of Signing Officer or Director — Date