

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000099455

Entity Name: ORLANDO SOD, INC.

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1029 NEW YORK AVE  
SAINT CLOUD, FL 34769

**New Principal Place of Business:**

**Current Mailing Address:**

1029 NEW YORK AVE  
SAINT CLOUD, FL 34769

**New Mailing Address:**

FEI Number: 59-3608981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NETTLES, MEREDITH  
1029 NEW YORK AVE  
SAINT CLOUD, FL 34769 US

**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: VP  
Name: NETTLES, TODD  
Address: P.O. BOX 250  
City-St-Zip: CHRISTMAS, FL 32709

Title: PD  
Name: NETTLES, MEREDITH  
Address: P.O. BOX 250  
City-St-Zip: CHRISTMAS, FL 32709

I hereby 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 all other like empowered.

SIGNATURE: MEREDITH NETTLES

PRES

03/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date