

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# U00037

FILED  
Jan 15, 2006  
Secretary of State

Entity Name: FLORIDA SOD GROWERS COOPERATIVE, INC.

## Current Principal Place of Business:

4002 TEAK COURT  
LABELLE, FL 33935 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 217  
LABELLE, FL 33975 US

## New Mailing Address:

FEI Number: 65-0162549

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBBINS, R. JAMES JR  
101 EAST KENNEDY BOULEVARD  
SUITE 3700  
TAMPA, FL 336020000 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

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DYMOND, DAVID  
Address: 4699 CANOE CREEK ROAD  
City-St-Zip: KENANSVILLE, FL 34739

Title: VD ( ) Delete  
Name: TRUENOW, KEITH  
Address: 26714 OAK SHADOW LANE  
City-St-Zip: MT DORA, FL 32757

Title: SD ( ) Delete  
Name: GRESSINGER, BILLY  
Address: 17824 79TH ST  
City-St-Zip: FELLSMERE, FL 32948

Title: D ( ) Delete  
Name: NUGENT, WILL  
Address: 8780 NW BETHEL FARMS ROAD  
City-St-Zip: ARCADIA, FL 34266

Title: TD ( ) Delete  
Name: GROSE, PAUL  
Address: KING RANCH, INC., 8050 SOUTH US 27  
City-St-Zip: SOUTH BAY, FL 33493

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

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

Title: D ( ) Change (X) Addition  
Name: GARRETT, MARK  
Address: KIRKLAND SOD, 4328 STATE ROAD 44  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID DYMOND

P

01/15/2006

Electronic Signature of Signing Officer or Director

Date