

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021007

Entity Name: BASS-CARLTON SOD, INC.**Current Principal Place of Business:**3554 FRIARS COVE ROAD
SAINT CLOUD, FL 34772**Current Mailing Address:**P.O. BOX 420067
KISSIMMEE, FL 34742-0067**FEI Number:** 59-3365036**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOWMAN, WILLIAM R ESQ
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE SUITE 1700
ORLANDO, FL 32801 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:** WILLIAM R. LOWMAN, JR.**03/08/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR, VP, SECRETARY, TREASURER
Name	PARTIN, ERICA A
Address	3554 FRIARS COVE RD
City-State-Zip:	SAINT CLOUD FL 34772

Title	DIRECTOR, VP
Name	ROHDE, JOHN D
Address	115 THREE CROSS DRIVE
City-State-Zip:	KENANSVILLE FL 34739

Title	DIRECTOR, PRESIDENT
Name	ROHDE, EDWIN H III
Address	3600 LAKE TOHOPEKALIGA ROAD
City-State-Zip:	ST CLOUD FL 34772

Title	DIRECTOR, VP
Name	ROHDE, NATHAN L
Address	4400 ROHDE ROAD
City-State-Zip:	OKEECHOBEE FL 34972

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: ERICA PARTIN**VP****03/08/2019**

Electronic Signature of Signing Officer/Director Detail

Date