

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**FILED
Jul 25 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 853402 (6)
1. Corporation Name
NELSON IRRIGATION CORPORATION



Principal Place of Business RT. 4, BOX 169 WALLA WALLA WA 99362	Mailing Address RT. 4, BOX 169 WALLA WALLA WA 99362
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/09/1982	3a. Date of Last Report 02/27/1996
21	22	23	24	4. FEI Number 37-0963413	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
BROWN, WILLIAM E 29025 NW 32ND AVE NEWBERRY FL 32669				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, BARTON R	1.2 NAME	
STREET ADDRESS	RT. 4, BOX 169	1.3 STREET ADDRESS	
CITY-ST-ZIP	WALLA WALLA WA	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEYER, LARRY P.	2.2 NAME	
STREET ADDRESS	RT. 4, BOX 169	2.3 STREET ADDRESS	
CITY-ST-ZIP	WALLA WALLA WA	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUPAR, ROBERT L	3.2 NAME	
STREET ADDRESS	RT. 4, BOX 169	3.3 STREET ADDRESS	
CITY-ST-ZIP	WALLA WALLA WA	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOLAN, JOHN F	4.2 NAME	
STREET ADDRESS	502 LINCOLN RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	GROSS POINTE MI	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONDAL, DANIEL E.	5.2 NAME	
STREET ADDRESS	RT. 4, BOX 169	5.3 STREET ADDRESS	Dudley Joyce
CITY-ST-ZIP	WALLA WALLA WA	5.4 CITY-ST-ZIP	Rt 4 Box 169 Airport Road
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, KAREN	6.2 NAME	
STREET ADDRESS	RT. 4, BOX 169	6.3 STREET ADDRESS	Walla Walla, WA 99362-9426
CITY-ST-ZIP	WALLA WALLA WA	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dudley Joyce SIGNATURE REQUIRED 7/17/97 509-525-7660

CR2E034 (4/97)