

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015442

FILED
Apr 06, 2009
Secretary of State

Entity Name: AUTOMATIC IRRIGATION LLC

Current Principal Place of Business:

14004 NW 19 AVE
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

14004 NW 19 AVE
OPA LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 56-2352988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVARENGA, DENNIS F
17710 NW 13CT
MIAMI GARDENS, FL 33169 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

MANAGING MEMBERS/MANAGERS:

Title: EVP () Delete
Name: ALVARENGA, DENNIS F MGR
Address: 17710 NW 13 CT
City-St-Zip: MIAMI GARDENS, FL 33169

Title: P () Delete
Name: DALEY, FERGUS B
Address: 1301 NW 177 TERR
City-St-Zip: MIAMI GARDENS, FL 33169 US

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

ADDITIONS/CHANGES:

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

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

Title: MGR () Change (X) Addition
Name: JOHNSON, ALVIN
Address: 19616 NW 29TH AVE
City-St-Zip: MIAMI GARDENS, FL 33056

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DENNIS ALVARENGA EVP 04/06/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date