

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106937

FILED  
May 03, 2009  
Secretary of State

Entity Name: ELITE IRRIGATION, L.L.C.

**Current Principal Place of Business:**

917 S.E. 3RD STREET, UNIT 300  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

917 S.E. 3RD STREET, UNIT 300  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 56-2654634      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: MGR      ( ) Delete  
Name: LUHRMAN, MARK A  
Address: 917 S.E. 3RD STREET, UNIT 300  
City-St-Zip: Ocala, FL 34471

Title: ST      ( ) Delete  
Name: LUHRMAN, MARK A  
Address: 917 S.E. 3RD STREET, UNIT 300  
City-St-Zip: Ocala, FL 34471

**ADDITIONS/CHANGES:**

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

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

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: MARK ALBERT LUHRMAN

MGR

05/03/2009

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