2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737178

FILED Jan 05, 2005 Secretary of State

Entity Name: FLORIDA IRRIGATION SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

9340 N. 56TH STREET SUITE 105

TEMPLE TERRACE, FL 33617

New Mailing Address: Current Mailing Address:

9340 N. 56TH STREET SUITE 105

TEMPLE TERRACE, FL 33617 US

FEI Number: 59-1781561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AMAROSA, JENNIFER C 9340 N. 56TH STREET SUITE 105

TEMPLE TERRACE, FL 33617 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete HINELINE, HARLAN ST. PEARRE, HARRY Name: Name: PO BOX 290874 Address: P.O. BOX 639 Address:

City-St-Zip: PORT ORANGE, FL City-St-Zip: RIVERVIEW, FL 33568

Title: PD Title: VD (X) Change () Addition () Delete NEFF, RICHARD Name: PERKINS, MICHAEL Name: Address: 4770 NE 11 AVE. Address: P.O. BOX 880667

City-St-Zip: FORT LAUDERDALE, FL 33334 City-St-Zip: BOCA RATON, FL 33488

Title: () Delete Title: SD (X) Change () Addition ST. PEARRE, HARRY HUTCHEON, WILLIAM Name: Name:

878 WATERWAY PLACE Address: P.O. BOX 639 Address: City-St-Zip: RIVERVIEW, FL 33568 City-St-Zip: LONGWOOD, FL 32750

(X) Change () Addition Title: SD () Delete Title: TD

MIRAGLIOTTA, JOHN Name: PERKINS, MICHAEL Name: 5508 W. LINEBAUGH AVE, SUITE 55 Address: 1901 NW 18TH ST. Address:

City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: TAMPA, FL 33624

Title: () Delete Title: (X) Change () Addition

MIGLIOTTA, JOHN NEFF, RICHARD Name: Name: 5508 W. LINEBAUGH AVE, SUITE 55 4770 NE 11TH AVENUE Address: Address: FORT LAUDERDALE, FL 33334 City-St-Zip: TAMPA, FL 33624 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN MIRAGLIOTTA TD 01/05/2005