

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 27, 2010
Secretary of State

DOCUMENT# 737178

Entity Name: FLORIDA IRRIGATION SOCIETY, INC.**Current Principal Place of Business:**4412 W. WALLACE AVENUE
TAMPA, FL 33611 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 13502
TAMPA, FL 33681 US**New Mailing Address:****FEI Number:** 59-1781561**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AMAROSA, JENNIFER C
4412 W. WALLACE AVENUE
TAMPA, FL FL 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

OFFICERS AND DIRECTORS:

Title: PD
Name: SHREVES, MATTHEW
Address: 22571 MADDEN LANE
City-St-Zip: SILVERHILL, AL 36756

Title: VD
Name: EATON, MATTHEW
Address: 3200 POWERS AVENUE
City-St-Zip: JACKSONVILLE, FL 32241

Title: SD
Name: CAVAIOLI, KEVIN
Address: 2801 N. POWERLINE ROAD
City-St-Zip: POMPANO BEACH, FL 33069

Title: TD
Name: HEIMSOTH, RANDY
Address: 2000 SARAGOSSA AVENUE
City-St-Zip: DELAND, FL 32724

Title: D
Name: PERKINS, MICHAEL
Address: P.O. BOX 880667
City-St-Zip: BOCA RATON, FL 33488

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MATTHEW SHREVES

PD

07/27/2010

Electronic Signature of Signing Officer or Director

Date