

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000014735

**Entity Name:** TOM CONLEY IRRIGATION, LLC

**Current Principal Place of Business:**

16586 SE 57TH PLACE  
OCKLAWAHA, FL 32179-2924

**Current Mailing Address:**

16586 SE 57TH PLACE  
OCKLAWAHA, FL 32179-2924 US

**FEI Number:** 20-4278549

**Certificate of Status Desired:** No

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

CONLEY, THOMAS L  
16586 SE 57TH PLACE  
OCKLAWAHA, FL 32179-2924 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CONLEY, THOMAS L  
Address 16586 SE 57TH PLACE  
City-State-Zip: OCKLAWAHA FL 32179-2924

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS CONLEY

**PRES**

**03/06/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date