

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90271 042 ***150.00

DOCUMENT # 268322	
1. Entity Name SENNINGER IRRIGATION INC	

Principal Place of Business 6416 OLD WINTER GARDEN RD. ORLANDO, FL 32835-1348	Mailing Address 6416 OLD WINTER GARDEN RD. ORLANDO, FL 32835-1348
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2. Principal Place of Business 16220 E. Highway 50	3. Mailing Address 16220 E. Highway 50
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Clermont, FL	City & State Clermont, FL
Zip 34711	Country
Zip 34711	Country

02142005 Chg-P CR2E034 (10/03)

4. FEI Number
59-1000959

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KALEEL, SAMUEL J. 6416 OLD WINTER GARDEN RD ORLANDO, FL 32835	Name Street Address (P.O. Box Number is Not Acceptable) 16220 E. Highway 50 City Clermont, FL Zip Code 34711

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEALY, A M 6325 WYNGLOW LANE ORLANDO, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HEALY, MARK 1735 BLOSSOMWOOD ORLANDO, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SENNINGER, THOMAS P. 5948 LAKE NELLIE RD CLERMONT, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV ELLIOTT, FREDERICK T. 12116 VALLEY RD. CLERMONT, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SKOLNIK, ADAM R. 12001 VALLEY RD. CLERMONT, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT KALEEL, SAMUEL J. 1127 BLACK ACRE TR WINTER SPRINGS, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Samuel J. Kaleel Samuel J. Kaleel 4/19/05 (407)293-5555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
2004/349

ATTACHMENT

2005 UNIFORM BUSINESS REPORT (UBR)
DOCUMENT # 268322
SENNINGER IRRIGATION INC

OFFICERS AND DIRECTORS

TITLE	DSV
NAME	CAROL KENNEDY
STREET ADDRESS	11019 ORANGESHIRE CT
CITY-ST-ZIP	OCOE FL 34761

TITLE	DV
NAME	JAMES BURKS
STREET ADDRESS	16740 APPALOOSA TRAIL
CITY-ST-ZIP	MONTVERDE FL 34756