## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## Apr 12, 2006 8:00 am Secretary of State **DOCUMENT # 268322** 04-12-2006 90077 048 \*\*\*150.00 1. Entity Name SENNINGER IRRIGATION INC 40046829 Principal Place of Business Mailing Address 16220 E HIGHWAY 50 16220 E HIGHWAY 50 CLERMONT, FL 34711 CLERMONT, FL 34711 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03312006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 59-1000959 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KALEEL, SAMUEL J. Street Address (P.O. Box Number is Not Acceptable) 16220 E HIGHWAY 50 CLERMONT, FL 34711 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TITLE Delete TITLE ☐ Change ☐ Addition HEALY A M NAME NAME STREET ADDRESS 6325 WYNGLOW LANE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP TITLE DV ☐ Delete TITLE ☐ Change ☐ Addition NAME HEALY, MARK NAME STREET ADDRESS 1735 BLOSSOMWOOD STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-7iP TITLE Delete TITI F Change ■ Addition NAME SENNINGER, THOMAS P. NAME STREET ADDRESS 5948 LAKE NELLIE RD STREET ADDRESS CITY-ST-ZIP CLERMONT, FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition ELLIOTT, FREDERICK T. NAME NAME STREET ADDRESS 12116 VALLEY RD. STREET ADDRESS CITY-ST-ZIP CLERMONT, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition SKOLNIK, ADAM R. NAME NAME STREET ADDRESS 12001 VALLEY RD. STREET ADDRESS CITY-ST-ZIP CLERMONT, FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KALEEL, SAMUEL J. NAME NAME STREET ADDRESS 1127 BLACK ACRE TR STREET ADDRESS CITY-ST-ZIP WINTER SPRINGS, FL CITY-ST-ZIP

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 muel J. Kaleel 4-10-06 (407 SIGNATURE:

## ATTACHMENT 40046853

**ATTACHMENT** 

2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # 268322

SENNINGER PRIGATION INC

## **OFFICERS AND DIRECTORS**

TITLE

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DSV

NAME

CAROL KENNEDY

STREET ADDRESS 11019 ORANGESHIRE CT

CITY-ST-ZIP OCOEE FL 34761

TITLE

DV

NAME

JAMES BURKS

STREET ADDRESS 16740 APPALOOSA TRAIL

CITY-ST-ZIP MONTVERDE FL 34756