

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 268322

FILED
Feb 18, 2010
Secretary of State

Entity Name: SENNINGER IRRIGATION INC

Current Principal Place of Business:

16220 E HIGHWAY 50
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

16220 E HIGHWAY 50
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 59-1000959 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KALEEL, SAMUEL J.
16220 E HIGHWAY 50
CLERMONT, FL 34711 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: HEALY, A M
Address: 6325 WYNGLOW LANE
City-St-Zip: ORLANDO, FL

Title: DV
Name: HEALY, MARK
Address: 1735 BLOSSOMWOOD
City-St-Zip: ORLANDO, FL

Title: DS
Name: SENNINGER, THOMAS P.
Address: 5948 LAKE NELLIE RD
City-St-Zip: CLERMONT, FL

Title: D
Name: ELLIOTT, FREDERICK T.
Address: 12116 VALLEY RD.
City-St-Zip: CLERMONT, FL

Title: DP
Name: BURKS, JAMES E
Address: 16740 APPALOOSA TRAIL
City-St-Zip: MONVERDE, FL 34756

Title: DT
Name: KALEEL, SAMUEL J.
Address: 1136 BLACK ACRE TR
City-St-Zip: WINTER SPRINGS, FL

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

SIGNATURE: SAMUEL J. KALEEL

DT

02/18/2010

Electronic Signature of Signing Officer or Director

Date