

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Mar 17 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 351000 (5)  
1. Corporation Name  
SOUTHEASTERN IRRIGATION, INC.

Principal Place of Business  
4921 CLOCK ROAD  
LAKE WORTH FL 33463

Mailing Address  
P.O. BOX 806  
BOYNTON BEACH FL 33425



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2315 Prestwick Place Suite, Apt. #, etc. 22 City & State 23 Winter Haven, FL Zip 24 33881		2a. Mailing Address 26 2315 Prestwick Place Suite, Apt. #, etc. 27 City & State 28 Winter Haven, FL Zip 29 33881		3. Date Incorporated or Qualified 08/20/1969	
				4. FEI Number 59-1264821	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent JARA, HELEN M 7740 STONE HARBOUR DR., #3 LAKE WORTH FL 33467		10. Name and Address of New Registered Agent 81 Name Jara, Helen M. 82 Street Address (P.O. Box Number is Not Acceptable) 2315 Prestwick Place 83 Winter Haven, FL 33881 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT JARA, HELEN M 7740 STONE HARBOUR DR., #3 LAKE WORTH FL 33467	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2315 Prestwick Place Winter Haven, FL 33881
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JARA, JOHN R 4921 CLOCK ROAD LAKE WORTH FL 33463	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JARA, STEPHEN J 10295 ST. ANDREWS ROAD BOYNTON BEACH FL 33436	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JARA, ANN M 10295 ST. ANDREWS ROAD BOYNTON BEACH FL 33436	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]* H. Jara M. TARA

3/18/98

041-299-4115

CR2E034 (10/97)